

Fill in this information to identify your case:

United States Bankruptcy Court for the:

MIDDLE DISTRICT OF PENNSYLVANIA

Case number (if known)

Chapter

7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Affiniti PA, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 46-3061357

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

Cogency Global Inc.
(Commercial Registered Office Provider)
600 North 2nd Street
Harrisburg, PA 17101

Number, Street, City, State & ZIP Code

Dauphin

County

PO Box 81594
Austin, TX 78758

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Refer to attachment for Schedule B

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

5171

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☒ Chapter 7
☐ Chapter 9
☐ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

Phone

■ After any administrative expenses are paid, no funds will be available to unsecured creditors.

☐ More than \$50 billion☐ More than \$50 billion

Debtor **Affiniti PA, LLC**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 12/12/2019
MM / DD / YYYY

X Virginia Bryant
Signature of authorized representative of debtor

Title Vice President of Finance

Virginia Bryant
Printed name

18. Signature of attorney **X** /s/ Martin J. Weis
Signature of attorney for debtor

Date 12/12/2019
MM / DD / YYYY

Martin J. Weis
Printed name

Dilworth Paxson LLP
Firm name

1500 Market Street, Suite 3500E
Philadelphia, PA 19102
Number, Street, City, State & ZIP Code

Contact phone 215-575-7000 Email address mweis@dilworthlaw.com

51379 PA
Bar number and State

Fill in this information to identify the case:

Debtor name Affiniti PA, LLC

United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 12/12/2019

x Virginia Bryant
Signature of individual signing on behalf of debtor

Virginia Bryant
Printed name

Vice President of Finance
Position or relationship to debtor

Fill in this information to identify the case:Debtor name **Affiniti PA, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **824,832.68****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **824,832.68****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **13,470,604.38****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **8,559.82****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **981,448.50****4. Total liabilities**
Lines 2 + 3a + 3b\$ **14,460,612.70**

Fill in this information to identify the case:

Debtor name **Affiniti PA, LLC**

United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

Regions Bank

3.1. Birmingham, AL 35201

Checking

3939

\$436,697.53

4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$436,697.53

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. Accounts receivable

11b. Over 90 days old:

68,125.15

-

0.00

=...

\$68,125.15

face amount

doubtful or uncollectible accounts

Debtor **Affiniti PA, LLC**
Name

Case number (If known) _____

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$68,125.15

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Electronics - Attached	\$0.00	N/A	\$127,850.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$127,850.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

Debtor **Affiniti PA, LLC**
Name

Case number (If known) _____

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. Refer to Schedule G list of Contract Parties and Leases		Unknown		Unknown
55.2. See Attached - Real Property Assets - Towers		Unknown		Unknown

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations			
64. Other intangibles, or intellectual property			

Debtor Affiniti PA, LLC
Name

Case number (If known) _____

**IP Blocks - 10282019 agreement
Pending Closure**

Unknown

\$61,440.00

IP Blocks - SLS 395

Unknown

\$30,720.00

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$92,160.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?

☒ No

☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

☒ No

☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.

☒ Yes Fill in the information below.

**Current value of
debtor's interest**

71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

Unsecured Proof of Claim in Chapter 13 Bankruptcy of Darol R. Lain and Georgia R. Lain. Western District of Texas (Austin) 17-11612-tmd

\$100,000.00

Nature of claim

Proof of Claim in Chapter 13 of Darol R. Lain and Georgia R. Lain (WDTX-Austin)

Amount requested

\$0.00

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets, country club membership

Debtor **Affiniti PA, LLC**
Name

Case number *(If known)* _____

78. **Total of Part 11.**
Add lines 71 through 77. Copy the total to line 90.

<div>\$100,000.00</div>

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**
☒ No
☐ Yes

Schedule B, Part 7, Question 41

AFFINITI PA, LLC - PERSONAL PROPERTY ASSETS - ELECTRONICS																			
State	Parent Account	Account Name	Product Name	Asset Name	Model Number	Serial Number	Affiniti Asset ID	Estimated Value	Status	Last Verified In Place Date									
PA	Affiniti - PA	Forest Area SD - Marienville Rptr	Alcatel 6212	Alcatel 6212	LS-6212	J078D009		\$ 500.00	Abandon	1/28/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta Cemetary Rptr	Alcatel 6212	Alcatel 6212	LS-6212	J378C100		\$ 500.00	Abandon	1/28/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta County Fire Tower Rptr	Alcatel 6212	Alcatel 6212	LS-6212	J078D004		\$ 500.00	Abandon	1/28/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta Cemetary Rptr	Antenna - 2ft 5.8G	Antenna - 2ft 5.8G	PK2F-52			\$ 150.00	Abandon	2/1/2019									
PA	Affiniti - PA	Forest Area SD - Marienville Rptr	APC UPS	APC UPS	Smart-UPS 1500 RM	AS0622130416		\$ 400.00	Abandon	1/30/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta Cemetary Rptr	APC UPS	APC UPS	Smart-UPS 2200 RM XL	JS0837014370		\$ 400.00	Abandon	1/30/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta County Fire Tower Rptr	APC UPS	APC UPS	1400 RM XL	AS0838261405		\$ 400.00	Abandon	1/30/2019									
PA	Affiniti - PA	Forest Area SD - Marienville Rptr	Orthogon-300-ODU-Ext	Orthogon-300-ODU-Ext	PTP-600-C	00:04:56:80:13:06		Unknown	Abandon	2/1/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta Cemetary Rptr	Orthogon-300-ODU-Ext	Orthogon-300-ODU-Ext	PTP-600-C	00:04:56:80:0d:07		Unknown	Abandon	2/1/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta County Fire Tower Rptr	Orthogon-300-ODU-Ext	Orthogon-300-ODU-Ext	PTP-600-C	00:04:56:80:07:ca		Unknown	Abandon	2/1/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta County Fire Tower Rptr	Orthogon-300-ODU-Ext	Orthogon-300-ODU-Ext	PTP-600-C	00:04:56:80:26:1c		Unknown	Abandon	2/1/2019									
PA	Affiniti - PA	Forest Area SD - Marienville Rptr	Orthogon-300-ODU-INT	Orthogon-300-ODU-Int	PTP-600-I	00:04:56:80:06:48		Unknown	Abandon	2/1/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta Cemetary Rptr	Orthogon-300-ODU-INT	Orthogon-300-ODU-Int	PTP-600-I	00:04:56:80:07:bf		Unknown	Abandon	2/1/2019									
PA	Affiniti - PA	Forest Area SD - Tionesta County Fire Tower Rptr	Orthogon-300-ODU-INT	Orthogon-300-ODU-Int	PTP-600-I			Unknown	Abandon	2/1/2019									
PA	Airesman Wood and Stone	Airesman Wood and Stone - Berlin	Alvarion RB-B14-5.4	Alvarion RB-B14-5.4		0010E7A47308		Unknown	Abandon	2/1/2019									
PA	Airesman Wood and Stone	Airesman Wood and Stone - Berlin	Antenna - 2ft 5.8G	Antenna - 2ft 5.8G	PK2F-52			\$ 150.00	Abandon	2/1/2019									
PA	Alexander Youth Network	Alexander Youth - Main	Zotac ZBOX MI527 Nano	ZBOX MI527 Nano	ZBOX-M1527NANO	G174100000086	ANA001058	\$ 500.00	Abandon	10/19/2018									
PA	Allamuchy Township School District	Allamuchy Township School	Ciena 3904	Ciena 3904	3904	M8084075	PA-001649	\$ 200.00	Abandon	1/30/2019									
PA	Allamuchy Township School District	Allamuchy Township School	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4615007733	PA-001632	\$ 400.00	Abandon	1/29/2019									
PA	Alpine Resort Operations LLC	Alpine Resorts - Blue Knob (Lodge Building)	Antenna - Cielo 2ft, 11G,	Antenna - Cielo 2ft, 11G, Andrew	VHLP2-11WA			\$ 150.00	Abandon	2/1/2019									
PA	Alpine Resort Operations LLC	Alpine Resorts - Blue Knob (Lodge Building)	Cielo 11 GHZ Low Subband 2	Cielo 11 GHZ Low Subband 2		R45068686		\$ 700.00	Abandon	2/1/2019									
PA	Alpine Resort Operations LLC	Alpine Resorts - Blue Knob (Lodge Building)	Cielo 11 GHZ Low Subband 2	Cielo 11 GHZ Low Subband 2	P01-110490-10211-E100	R45068686	008092	\$ 700.00	Abandon	1/24/2019									
PA	Alpine Resort Operations LLC	Alpine Resorts - Blue Knob (Lodge Building)	Cielo CG2 IDU 100	Cielo CG2 IDU 100		3010300020503003	PA-001787	\$ 700.00	Abandon	2/1/2019									
PA	Alpine Resort Operations LLC	Alpine Resorts - Blue Knob (Lodge Building)	Ciena 3916	Ciena 3916	3916	M8704766	PA-001775	\$ 400.00	Abandon	1/30/2019									
PA	Appalachia IU 8	IU8 - Executive Office (Main)	Adtran TA924	Adtran TA924	TA924	CFG1271843		Unknown	Abandon	1/28/2019									
PA	Appalachia IU 8	IU8 - Somerset Branch Office	Antenna - Cielo 2ft, 18G,	Antenna - Cielo 2ft, 18G, Andrew	VHLP2-18C			\$ 150.00	Abandon	2/1/2019									
PA	Appalachia IU 8	IU8 - Tussey Mountain SD	Antenna - Dragonwave 2ft, 11G	Antenna - Dragonwave 2ft, 11G	VHLP2-18C			\$ 150.00	Abandon	2/1/2019									
PA	Appalachia IU 8	IU8 - Somerset Branch Office	Cielo 18 GHZ High Subband 3	Cielo 18 GHZ High Subband 3 WIDE	COH-181560-10311-E100	R51130623	008316	\$ 700.00	Abandon	6/21/2018									
PA	Appalachia IU 8	IU8 - Somerset Branch Office	Cielo CG2 IDU 200	Cielo CG2 IDU 200		3010300020201630		\$ 700.00	Abandon	2/1/2019									
PA	Appalachia IU 8	IU8 - Tussey Mountain SD	DragonWave Qntm IDU 2xCh	DragonWave Qntm IDU 2xCh 800M		A2002DEC1623	006257	Unknown	Abandon	6/21/2018									
PA	Appalachia IU 8	IU8 - Tussey Mountain SD	DragonWave Qntm ODU 18G	DragonWave Qntm ODU 18G Low		A1N13DDL0150	009013	Unknown	Abandon	6/21/2018									
PA	Appalachia IU 8	IU8 - Park Street Branch Office	Siklu EH600TX-Kit, 500Mb/s HD	Siklu EH600TX-Kit, 500Mb/s HD		T.BJF7C4004E		Unknown	Abandon	1/30/2019									
PA	Appalachia IU 8	IU8 - Executive Office (Main)	Telco Systems 3308	Telco Systems 3308	TMC-3308-AC-NA	0317240762	PA-001862	\$ 600.00	Abandon	1/30/2019									
PA	Appalachia IU 8	IU8 - Executive Office (Main)	Telco Systems 3308	Telco Systems 3308	TMC-3308-AC-NA	0318091272	PA-001863	\$ 600.00	Abandon	1/30/2019									
PA	Appalachia IU 8	IU8 - Duncansville Branch Office	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121642	PA-000020	\$ 600.00	Abandon	1/29/2019									
PA	Appalachia IU 8	IU8 - Northern Bedford County SD	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121623	PA-002366	\$ 600.00	Abandon	1/29/2019									
PA	Appalachia IU 8	IU8 - Park Street Branch Office	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121682	PA-000014	\$ 600.00	Abandon	1/29/2019									
PA	Appalachia IU 8	IU8 - Richland Branch Office	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121686	PA-000012	\$ 600.00	Abandon	1/29/2019									
PA	Appalachia IU 8	IU8 - Somerset Branch Office	Telco Systems 340	Telco Systems 340	TMC-340-NA	2018080131		\$ 600.00	Abandon	1/29/2019									
PA	Appalachia IU 8	IU8 - Tussey Mountain SD	Telco Systems 340	Telco Systems 340	TMC-340-NA	2018070066	PA-001875	\$ 600.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Indiana Area SD	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	K1681383		\$ 600.00	Abandon	1/28/2019									
PA	ARIN IU 28	IU28 - Indiana County Technology Ctr	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	G2550278		\$ 600.00	Abandon	1/28/2019									
PA	ARIN IU 28	IU28 - Penns Manor SD	Antenna - Dragonwave 3ft, 11G	Antenna - Dragonwave 3ft, 11G	VHLP3-11WA			\$ 150.00	Abandon	2/1/2019									
PA	ARIN IU 28	IU28 - Apollo Ridge SD	Ciena 3916	Ciena 3916	3916	M8806570	PA-001810	\$ 400.00	Abandon	1/30/2019									
PA	ARIN IU 28	IU28 - Homer-Center SD	Ciena 3916	Ciena 3916	3916	M8389139		\$ 400.00	Abandon	1/30/2019									
PA	ARIN IU 28	IU28 - Lenape Area Vo-Tech	Ciena 3916	Ciena 3916	3916	M8535356	PA-001704	\$ 400.00	Abandon	1/30/2019									
PA	ARIN IU 28	IU28 - Marion Center Area SD	Ciena 3916	Ciena 3916	3916	M8663323	PA-001792	\$ 400.00	Abandon	1/30/2019									
PA	ARIN IU 28	IU28 - Penns Manor SD	Ciena 3916	Ciena 3916	3916	M8806614	PA-001814	\$ 400.00	Abandon	1/30/2019									
PA	ARIN IU 28	IU28 - Purchase Line SD	Ciena 3916	Ciena 3916	3916	M8046264		\$ 400.00	Abandon	1/30/2019									
PA	ARIN IU 28	IU28 - United SD	Ciena 3916	Ciena 3916	3916	M8806584	PA-001809	\$ 400.00	Abandon	1/30/2019									
PA	ARIN IU 28	IU28 - Penns Manor SD	Cisco 3560G Switch	Cisco 3560G Switch	FOC1109Y238			\$ 2,000.00	Abandon	1/31/2019									
PA	ARIN IU 28	IU28 - Penns Manor SD	DragonWave Qntm IDU 2xCh	DragonWave Qntm IDU 2xCh 800M		A2002DHJ0064		Unknown	Abandon	2/1/2019									
PA	ARIN IU 28	IU28 - Penns Manor SD	DragonWave Qntm ODU 11G	DragonWave Qntm ODU 11G High	RH-HP-11-B2			Unknown	Abandon	2/1/2019									
PA	ARIN IU 28	IU28 - ARIN IU 28 HQ	FortiGate-100D	FortiGate-100D	FG-100D	FG100D3G14804282		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - ARIN IU 28 HQ	FortiGate-100D	FortiGate-100D	FG-100D	FG100D3G13801094		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Lenape Area Vo-Tech	FortiGate-100D	FortiGate-100D	FG-100D	FG100D3G13817636		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - United SD	FortiGate-100D	FortiGate-100D	FG-100D	FG100D3G14805202		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Penns Manor SD	FortiGate-300D	FortiGate-300D	FGT_300D	FGT3HD3915806630		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Head Start	FortiGate-50E	FortiGate-50E	FGT_50E	FGT5OE3U16021713		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Apollo Ridge SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613061228		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Armstrong SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613062246		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Blairsville-Saltsburg SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613063970		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Freepoint Area SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613061284		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Homer-Center SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613060467		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Homer-Center SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613061681		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Indiana County Technology Ctr	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613062252		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Indiana County Technology Ctr	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4Q15013690		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Leechburg Area SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613061669		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Lenape Area Vo-Tech	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613014591		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Marion Center Area SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613061769		\$ 400.00	Abandon	1/29/2019									
PA	ARIN IU 28	IU28 - Purchase Line SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613062054		\$ 400.00	Abandon	1/29/2019									

PA	ARIN IU 28	IU28 - Purchase Line SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613044336		\$	400.00	Abandon	1/29/2019
PA	ARIN IU 28	IU28 - United SD	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613061792		\$	400.00	Abandon	1/29/2019
PA	ARIN IU 28	IU28 - ARIN Center for Adult Education	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121648		\$	600.00	Abandon	1/29/2019
PA	ARIN IU 28	IU28 - ARIN IU 28 HQ	Telco Systems 340F	Telco Systems 340F	T-Marc 340F	0314191062		\$	600.00	Abandon	1/29/2019
PA	Brookville Hospital	PHH - Brookville Hospital	Alcatel 6212	Alcatel 6212	LS-6212	K418A634		\$	500.00	Abandon	1/28/2019
PA	Cambria Heights School District	Cambria Heights SD - Cambria Heights HS	Alcatel 6212	Alcatel 6212	LS-6212	J378C148		\$	500.00	Abandon	1/28/2019
PA	Cambria Heights School District	Cambria Heights SD - Carrolltown ES	Alcatel 6212	Alcatel 6212	LS-6212	K078A380		\$	500.00	Abandon	1/28/2019
PA	Cambria Heights School District	Cambria Heights SD - Carrolltown ES	Alcatel 9500MXC IDU INU 200M	Alcatel 9500MXC IDU INU 200M	INU, RAC30v3,DAC GE	EBT07529440		\$	500.00	Abandon	1/31/2019
PA	Cambria Heights School District	Cambria Heights SD - Carrolltown ES	Alcatel 9500MXC ODU 23G Low	Alcatel 9500MXC ODU 23G Low	Alcatel ODU 300 HP	EBT0829A008		\$	500.00	Abandon	1/31/2019
PA	Cambria Heights School District	Cambria Heights SD - Cambria Heights HS	Antenna - 2ft 5.8G	Antenna - 2ft 5.8G	PX2F-52			\$	150.00	Abandon	2/1/2019
PA	Cambria Heights School District	Cambria Heights SD - Carrolltown ES	Antenna - Alcatel 9500 1ft 23G	Antenna - Alcatel 9500 1ft 23G	VHLP1-23B			\$	100.00	Abandon	2/1/2019
PA	Cambria Heights School District	Cambria Heights SD - Cambria Heights HS	FortiGate-300D	FortiGate-300D	FGT_300D	FGT3HD3916802386		\$	400.00	Abandon	1/29/2019
PA	Cambria Heights School District	Cambria Heights SD - Cambria Heights HS	Orthogon-300-ODU-Ext	Orthogon-300-ODU-Ext	PTP-600-C	00:04:56:80:08:39		Unknown	Abandon	2/1/2019	
PA	Central Cambria School District	Central Cambria SD - Central Cambria HS	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	H4982702		Unknown	Abandon	1/28/2019	
PA	Central Cambria School District	Central Cambria SD - Jackson ES	Ciena 3904	Ciena 3904	3904	M8084349	PA-001646	\$	200.00	Abandon	1/30/2019
PA	Central Cambria School District	Central Cambria SD - Central Cambria HS	Siklu EH600TX-Kit, 500Mb/s HD	Siklu EH600TX-Kit, 500Mb/s HD		T.BJF66L0038	PA-001806	Unknown	Abandon	1/30/2019	
PA	Clearfield Hospital	PHH - Clearfield Hospital	Alcatel 6212	Alcatel 6212	LS-6212	J518A230		\$	400.00	Abandon	1/28/2019
PA	CNO Financial Services	CNO Financial - Holidaysburg	Antenna - 1ft 5.8G	Antenna - 1ft 5.8G				\$	100.00	Abandon	2/1/2019
PA	CNO Financial Services	CNO Financial - Holidaysburg	Ciena 3916	Ciena 3916	3916	M8663723	PA-001774	\$	400.00	Abandon	1/30/2019
PA	CNO Financial Services	CNO Financial - Holidaysburg	Redline 54 Mb IDU	Redline 54 Mb IDU				\$	-	Abandon	2/1/2019
PA	CNO Financial Services	CNO Financial - Holidaysburg	Redline ODU	Redline ODU	AN-50e			\$	-	Abandon	2/1/2019
PA	DQE Communications	DQE - Pittsburg Colo	Raisecom 2924	Raisecom 2924	2924	111614001102B12A11B0008G		Unknown	Abandon	2/1/2019	
PA	DuBois Area School District	DuBois Area SD - Juniata ES	Telco Systems 3348	Telco Systems 3348	TMC-3348S-2AC-NA	0314290015	PA-000023	\$	800.00	Abandon	1/29/2019
PA	DuBois Area School District	DuBois Area SD - Maintenance Building	Telco Systems 3348	Telco Systems 3348	TMC-3348S-2AC-NA	0314260053	PA-000017	\$	800.00	Abandon	1/29/2019
PA	DuBois Area School District	DuBois Area SD - Oklahoma ES	Telco Systems 3348	Telco Systems 3348	TMC-3348S-2AC-NA	0314260057	PA-000018	\$	800.00	Abandon	1/29/2019
PA	DuBois Area School District	DuBois Area SD - Senior HS	Telco Systems 3348	Telco Systems 3348	TMC-3348S-2AC-NA	0314260065	PA-000019	\$	800.00	Abandon	1/29/2019
PA	DuBois Area School District	DuBois Area SD - Wasson ES	Telco Systems 3348	Telco Systems 3348	TMC-3348S-2AC-NA	0314290014	PA-000024	\$	800.00	Abandon	1/29/2019
PA	DuBois Area School District	DuBois Area SD - CG Johnson ES	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121639	PA-000021	\$	500.00	Abandon	1/29/2019
PA	DuBois Area School District	DuBois Area SD - MS	Telco Systems 8001	Telco Systems 8001	T-Marc 8001	0316140097	PA-001815	\$	1,000.00	Abandon	1/29/2019
PA	Forest Area School District	Forest Area SD - West Forest School	Antenna - 2ft 5.8G	Antenna - 2ft 5.8G	PX2F-52			\$	150.00	Abandon	2/1/2019
PA	Forest Area School District	Forest Area SD - East Forest School	Ciena 3904	Ciena 3904	3904	M8152022		\$	400.00	Abandon	1/30/2019
PA	Forest Area School District	Forest Area SD - West Forest School	Ciena 3904	Ciena 3904	3904	M8152024		\$	400.00	Abandon	1/30/2019
PA	Forest Area School District	Forest Area SD - West Forest School	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D4613014050		\$	400.00	Abandon	1/29/2019
PA	Forest Area School District	Forest Area SD - West Forest School	Orthogon-300-ODU-Ext	Orthogon-300-ODU-Ext	PTP-600-C	00:04:56:80:07:e4		Unknown	Abandon	2/1/2019	
PA	Forest Area School District	Forest Area SD - East Forest School	Orthogon-300-ODU-INT	Orthogon-300-ODU-Int	PTP-600-I	00:04:56:80:3d:43		Unknown	Abandon	2/1/2019	
PA	Fulton County Medical Center	FCMC - McConnellsburg	Ciena 3916	Ciena 3916	3916	M8806524	PA-001813	\$	400.00	Abandon	1/30/2019
PA	Geisinger Grays Woods	Geisinger - Gray's Woods	Ciena 3916	Ciena 3916	3916	M8663704	PA-001761	\$	400.00	Abandon	1/30/2019
PA	Geisinger System Services	Geisinger - Lewistown Hospital	Ciena 3916	Ciena 3916	3916	M8663701	PA-001762	\$	400.00	Abandon	1/30/2019
PA	Geisinger System Services	Geisinger - Wound Care Center Harrisburg	Ciena 3916	Ciena 3916	3916	M9064607		\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - ELCO Family Practice	Ciena 3904	Ciena 3904	3904	M8152054	PA-001671	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - HMC Lebanon	Ciena 3904	Ciena 3904	3904	M8111928	PA-001667	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - HMC - Palmyra	Ciena 3904	Ciena 3904	3904	M8152012	PA-001659	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - Jonestown Health Center	Ciena 3904	Ciena 3904	3904	M8152009	PA-001666	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - Lab	Ciena 3904	Ciena 3904	3904	M8152056	PA-001657	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - Myerstown RAD	Ciena 3904	Ciena 3904	3904	M8152016	PA-001670	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - Outpatient PT	Ciena 3904	Ciena 3904	3904	M8152028	PA-001660	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - Pediatrics	Ciena 3904	Ciena 3904	3904	M8152034	PA-001665	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - Quentin Road Center	Ciena 3904	Ciena 3904	3904	M8164286	PA-001669	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - Wellspan Women's Services	Ciena 3904	Ciena 3904	3904	M8152059	PA-001658	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - West Cornwall Family Practice	Ciena 3904	Ciena 3904	3904	M8111943	PA-001668	\$	400.00	Abandon	1/30/2019
PA	Good Samaritan Hospital of Lebanon	GSH - Data Center (ISRC)	Ciena 3942	Ciena 3942	3942	M8012641	PA-001663	\$	400.00	Abandon	1/30/2019
PA	Hanover Hospital	Hanover Hospital - Spring Grove Clinic	Alcatel 6212	Alcatel 6212	LS-6212	K418A585		\$	600.00	Abandon	1/28/2019
PA	Holy Spirit Hospital	Geisinger - Camp Hill IT Center	Alcatel 6224	Alcatel 6224	LS-6224	H498B588		\$	600.00	Abandon	1/28/2019
PA	Holy Spirit Hospital	Holy Spirit - Broadstreet Family Health Center	Ciena 3904	Ciena 3904	3904	M8152033	PA-001594	\$	400.00	Abandon	1/30/2019
PA	Holy Spirit Hospital	Holy Spirit - Center for Women's Health (EAST)	Ciena 3904	Ciena 3904	3904	M8083668	PA-001641	\$	400.00	Abandon	1/30/2019
PA	Holy Spirit Hospital	Holy Spirit - Internal Medicine of Mechanicsburg	Ciena 3904	Ciena 3904	3904	M8083673	PA-001643	\$	400.00	Abandon	1/30/2019
PA	Holy Spirit Hospital	Holy Spirit - Ryder, Barnes & Assoc	Ciena 3904	Ciena 3904	3904	M8083665	PA-002715	\$	400.00	Abandon	1/30/2019
PA	Holy Spirit Hospital	Geisinger - Camp Hill IT Center	Ciena 3916	Ciena 3916	3916	M8806569		\$	400.00	Abandon	1/30/2019
PA	Holy Spirit Hospital	Geisinger - Dillsburg	Ciena 3916	Ciena 3916	3916	M8806552		\$	400.00	Abandon	1/30/2019
PA	Huntingdon Area School District	IU11 - Huntingdon Area SD - HS	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	H1782287	PA-000603	\$	600.00	Abandon	1/28/2019
PA	Huntingdon Area School District	IU11 - Huntingdon Area SD - HS	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121663		\$	500.00	Abandon	1/29/2019
PA	Huntingdon Area School District	IU11 - Huntingdon Area SD - Southside ES	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121573		\$	500.00	Abandon	1/29/2019
PA	Huntingdon County Career and Technology	HCCTC - Mill Creek	Edgemarc 4806-25	Edgemarc 4806-25	EdgeMarc 4806-102-25	H516060200300079	PA-001703	Unknown	Abandon	1/30/2019	
PA	Inclinator	Inclinator - Harrisburg	Alcatel 6224	Alcatel 6224	LS-6224	H498B521	PA-000174	\$	500.00	Abandon	1/28/2019
PA	Inclinator	Inclinator - Harrisburg	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT07386224		\$	500.00	Abandon	1/31/2019
PA	Inclinator	Inclinator - Harrisburg	Alcatel 9500MXC ODU 18G High	Alcatel 9500MXC ODU 18G High	Alcatel ODU 300 HP	EBT0902R304		\$	500.00	Abandon	1/31/2019
PA	Inclinator	Inclinator - Harrisburg	Antenna - Alcatel 2ft 18G	Antenna - Alcatel 2ft 18G	VHLP2-18-SE1			\$	150.00	Abandon	2/1/2019
PA	Indiana Area School District	Indiana Area SD- Admin/East Pike ES	Zotac ZBOX MI527 Nano	ZBOX MI527 Nano	ZBOX-M1527NANO	G174100000123	ANA001065	\$	500.00	Abandon	12/8/2017
PA	Indiana Area School District	Indiana Area SD- Admin/East Pike ES	Zotac ZBOX MI527 Nano	ZBOX MI527 Nano	ZBOX-M1527NANO	G174100000053	ANA001090	\$	500.00	Abandon	12/8/2017
PA	Indiana Regional Medical Center	IRMC - 119 Professional Center	Telco Systems 340	Telco Systems 340	TMC-340-NA	2018070043	PA-001858	\$	500.00	Abandon	1/29/2019
PA	Indiana Regional Medical Center	IRMC - Blairsville Annex	Telco Systems 340	Telco Systems 340	TMC-340-NA	2018070041	PA-001859	\$	500.00	Abandon	1/29/2019
PA	Indiana Regional Medical Center	IRMC - Main Hospital	Telco Systems 380	Telco Systems 380	T-Marc 380	0317440070	PA-001857	\$	500.00	Abandon	1/29/2019
PA	Indiana University of Pennsylvania	IUP - Monroeville	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	H4982689		\$	600.00	Abandon	1/28/2019
PA	Indiana University of Pennsylvania	IUP - Stright Hall	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	G2450343		\$	600.00	Abandon	1/28/2019

PA	Inperium	Inperium - Reading	Cisco 4431 Router	Cisco 4431 Router	ISR4431	FJC2120D0QD	PA-001846	\$	300.00	Abandon	1/31/2019
PA	JC Blair Memorial Hospital	JC Blair - Huntingdon	Ciena 3920	Ciena 3920	3920	M8041856	PA-001599	\$	400.00	Abandon	1/30/2019
PA	KINBER	KINBER - HACC - Gettysburg	Ciena 3916	Ciena 3916	3916	M8787622	PA-001796	\$	400.00	Abandon	1/30/2019
PA	KINBER	KINBER - HACC - Harrisburg (Main Office)	Ciena 3916	Ciena 3916	3916	M8787611	PA-001795	\$	400.00	Abandon	1/30/2019
PA	KINBER	KINBER - HACC - Harrisburg (Main Office)	Ciena 3916	Ciena 3916	3916	M8787637		\$	400.00	Abandon	1/30/2019
PA	KINBER	KINBER - HACC - Lebanon	Ciena 3916	Ciena 3916	3916	M8787587	PA-001798	\$	400.00	Abandon	1/30/2019
PA	KINBER	KINBER - HACC - York	Ciena 3916	Ciena 3916	3916	M8787586	PA-001797	\$	400.00	Abandon	1/30/2019
PA	KINBER	Harrisburg Area Community College	Zotac ZBOX MI527 Nano	ZBOX MI527 Nano	ZBOX-M1527NANO	G173400000480	ANA001022	\$	500.00	Abandon	5/21/2018
PA	Lancaster Bible College	LBC - Lancaster Bible College	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	H1782205	PA-000308	\$	600.00	Abandon	1/28/2019
PA	Lancaster Laboratories	Lancaster Labs - Lancaster	Alvarion RB-B14-5.8	Alvarion RB-B14-5.8		0010E7E40B7D			Unknown	Abandon	2/1/2019
PA	Lancaster Laboratories	Lancaster Labs - Lancaster	Antenna - 1ft 5.8G	Antenna - 1ft 5.8G				\$	100.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Burkholder Paving	Alcatel 6224	Alcatel 6224	LS-6224	H2484647		\$	500.00	Abandon	1/28/2019
PA	Martin Limestone Inc.	NESL - New Holland Concrete	Alcatel 6224	Alcatel 6224	LS-6224	J168A995		\$	500.00	Abandon	1/28/2019
PA	Martin Limestone Inc.	NESL - Corporate	Alvarion BU-B100-5.4	Alvarion BU-B100-5.4		0010E7845A6C			Unknown	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Limeville	Alvarion RB-B14-5.8	Alvarion RB-B14-5.8		0010E7C4881B			Unknown	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Valley Forge	Alvarion RB-B14-5.8	Alvarion RB-B14-5.8		0010E7E40B79			Unknown	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Burkholder Paving	Alvarion RB-B28-5.8	Alvarion RB-B28-5.8		0010E7A43C99			Unknown	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Corporate	Antenna - 2ft 5.8G	Antenna - 2ft 5.8G	PX2F-52			\$	150.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Limeville	Antenna - 2ft 5.8G	Antenna - 2ft 5.8G	PX2F-52			\$	150.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Valley Forge	Antenna - 2ft 5.8G	Antenna - 2ft 5.8G	PX2F-52			\$	150.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Denver	Antenna - Cielo 1ft, 23G,	Antenna - Cielo 1ft, 23G, Andrew	VHLP1-23			\$	100.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Corporate	Antenna - Cielo 2ft, 11G,	Antenna - Cielo 2ft, 11G, Andrew	VHLP2-11			\$	150.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - New Holland Concrete	Cabinet	Cabinet	WASP Cabinet			\$	150.00	Abandon	1/31/2019
PA	Martin Limestone Inc.	NESL - Corporate	Cielo 11 GHZ High Subband 2	Cielo 11 GHZ High Subband 2 WIDE		R28070130		\$	400.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Denver	Cielo 23 GHZ High Subband 3	Cielo 23 GHZ High Subband 3 WIDE		R48086179		\$	400.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Corporate	Cielo CG2 IDU 200	Cielo CG2 IDU 200		3010300020502908		\$	400.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Denver	Cielo CG2 IDU 200	Cielo CG2 IDU 200		3010300020502906		\$	400.00	Abandon	2/1/2019
PA	Martin Limestone Inc.	NESL - Burkholder Paving	Ciena 3916	Ciena 3916	3916	M8611542	PA-001713	\$	400.00	Abandon	1/30/2019
PA	Martin Limestone Inc.	NESL - Corporate	Ciena 3916	Ciena 3916	3916	M8611545	PA-001714	\$	400.00	Abandon	1/30/2019
PA	Martin Limestone Inc.	NESL - Denver	Ciena 3916	Ciena 3916	3916	M8611540	PA-001712	\$	400.00	Abandon	1/30/2019
PA	Martin Limestone Inc.	NESL - Limeville	Ciena 3916	Ciena 3916	3916	M8611541	PA-001717	\$	400.00	Abandon	1/30/2019
PA	Martin Limestone Inc.	NESL - Valley Forge	Ciena 3916	Ciena 3916	3916	M8704763	PA-001773	\$	400.00	Abandon	1/30/2019
PA	Martin Limestone Inc.	NESL - Weaverland Quarry	Ciena 3916	Ciena 3916	3916	M8611543	PA-001715	\$	400.00	Abandon	1/30/2019
PA	Martin Limestone Inc.	NESL - Corporate	Ruckus P300 PTP Radio	Ruckus P300 PTP Radio		911603504419		\$	600.00	Abandon	1/30/2019
PA	Martin Limestone Inc.	NESL - Corporate	Ruckus P300 PTP Radio	Ruckus P300 PTP Radio		911603804223		\$	600.00	Abandon	1/30/2019
PA	Martin Limestone Inc.	NESL - New Holland Concrete	Ruckus P300 PTP Radio	Ruckus P300 PTP Radio		911603704529		\$	600.00	Abandon	1/30/2019
PA	Martin Limestone Inc.	NESL - Weaverland Quarry	Ruckus P300 PTP Radio	Ruckus P300 PTP Radio		911603704228		\$	600.00	Abandon	1/30/2019
PA	Masters Communications	Masters - Hays Mill Fire Tower	Alcatel 6224	Alcatel 6224	LS-6224	H2180067		\$	600.00	Abandon	1/28/2019
PA	Masters Communications	Masters - Hays Mill Fire Tower	Antenna - 3ft 5.8G	Antenna - 3ft 5.8G	PX3F-52			\$	200.00	Abandon	2/1/2019
PA	Masters Communications	Masters - Hays Mill Fire Tower	APC UPS	APC UPS	Smart-UPS 2200 RM XL	JS0631036192		\$	500.00	Abandon	1/30/2019
PA	Masters Communications	Masters - Hays Mill Fire Tower	Orthogon-300-ODU-Ext	Orthogon-300-ODU-Ext	PTP-600-C	00:04:56:80:2b:69			Unknown	Abandon	2/1/2019
PA	Masters Communications	Masters - Baer Tower	Radwin RW-2050-D100	Radwin RW-2050-D100	Radwin Ltd.	P128201000A00A47			Unknown	Abandon	2/1/2019
PA	Meadville Medical Center	Meadville Medical Center - Grove Street	Ciena 3916	Ciena 3916	3916	M9064932	PA-001856	\$	400.00	Abandon	1/30/2019
PA	Meadville Medical Center	Meadville Medical Center - Grove Street	Zotac ZBOX MI527 Nano	ZBOX MI527 Nano	ZBOX-M1527NANO	G173400000490	ANA001032	\$	500.00	Abandon	6/18/2018
PA	Meadville Medical Center	Meadville Medical Center - Main Hospital	Zotac ZBOX MI527 Nano	ZBOX MI527 Nano	ZBOX-M1527NANO	G174100000108	ANA001055	\$	500.00	Abandon	6/18/2018
PA	Moshannon Valley School District	Moshannon Valley SD - Houtzdale	FortiGate-300D	FortiGate-300D	FGT_300D	FGT3HD3916802502		\$	400.00	Abandon	1/29/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Shirley Township ES	Alcatel 7210 SAS-M	Alcatel 7210 SAS-M	SAS-M 7210	NS0947C0551	PA-000596	\$	700.00	Abandon	1/28/2018
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Kistler ES	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT07204787		\$	700.00	Abandon	1/31/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Shirley Township ES	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT06254307		\$	700.00	Abandon	1/31/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Shirley Township ES	Alcatel 9500MXC ODU 18G High	Alcatel 9500MXC ODU 18G High	Alcatel ODU 300 HP	EBT06310123		\$	700.00	Abandon	1/31/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Kistler ES	Alcatel 9500MXC ODU 18G Low	Alcatel 9500MXC ODU 18G Low	Alcatel ODU 300 HP	EBT06364108		\$	700.00	Abandon	1/31/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Shirley Township ES	Antenna - Alcatel 2ft 18G	Antenna - Alcatel 2ft 18G	VHLP2-18-SE1			\$	150.00	Abandon	2/1/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Kistler ES	Antenna - Alcatel 9500 2ft 18G	Antenna - Alcatel 9500 2ft 18G	VHLP2-18-SE1			\$	150.00	Abandon	2/1/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Shirley Township ES	Antenna - Cielo 2ft, 18G,	Antenna - Cielo 2ft, 18G, Andrew	VHLP2-18-SE1			\$	150.00	Abandon	2/1/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Shirley Township ES	Cielo 18 GHZ High Subband 3	Cielo 18 GHZ High Subband 3 WIDE		R26070004		\$	400.00	Abandon	2/1/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Shirley Township ES	Cielo CG2 IDU 300	Cielo CG2 IDU 300		3010300020101039		\$	400.00	Abandon	2/1/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Junior-Senior HS	Ciena 3930	Ciena 3930	3930	M8747160	PA-001790	\$	400.00	Abandon	1/30/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Kistler ES	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121589		\$	400.00	Abandon	1/29/2019
PA	Mount Union Area School District	IU11 - Mount Union Area SD - Mapleton-Union ES	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121590		\$	400.00	Abandon	1/29/2019
PA	Nason Hospital	Nason - Roaring Springs	Ciena 3916	Ciena 3916	3916	M8535363	PA-001699	\$	400.00	Abandon	1/30/2019
PA	Nason Hospital	Nason - Roaring Springs	Ciena 3916	Ciena 3916	3916	M8535360	PA-001700	\$	400.00	Abandon	1/30/2019
PA	Northern Bedford County School District	Northern Bedford County SD- Bedford	FortiGate-100E	FortiGate-100E	FGT_100E	FG100EQA16002667		\$	400.00	Abandon	1/29/2019
PA	Orthopedic Institute of PA	OIP - Harrisburg Office	Alcatel 6212	Alcatel 6212	LS-6212	K068A919		\$	500.00	Abandon	1/28/2019
PA	Orthopedic Institute of PA	OIP - Hershey Office	Alcatel 6212	Alcatel 6212	LS-6212	L4288110		\$	500.00	Abandon	1/28/2019
PA	Orthopedic Institute of PA	OIP - Main Camp Hill	Alcatel 6212	Alcatel 6212	LS-6212	K068A843		\$	500.00	Abandon	1/28/2019
PA	Orthopedic Institute of PA	OIP - Carlisle Office	Alcatel 6224	Alcatel 6224	LS-6224	H498B573		\$	500.00	Abandon	1/28/2019
PA	Orthopedic Institute of PA	OIP - Harrisburg Office	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0839H663		\$	700.00	Abandon	1/31/2019
PA	Orthopedic Institute of PA	OIP - Main Camp Hill	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT07292990		\$	700.00	Abandon	1/31/2019
PA	Orthopedic Institute of PA	OIP - Harrisburg Office	Alcatel 9500MXC ODU 11G High	Alcatel 9500MXC ODU 11G High	Alcatel ODU 300 HP	EBT0914L430		\$	700.00	Abandon	1/31/2019
PA	Orthopedic Institute of PA	OIP - Main Camp Hill	Alcatel 9500MXC ODU 11G Low	Alcatel 9500MXC ODU 11G Low	Alcatel ODU 300 HP	EBT0906E237		\$	700.00	Abandon	1/31/2019
PA	Orthopedic Institute of PA	OIP - Harrisburg Office	Antenna - Alcatel 9500 4ft 11G	Antenna - Alcatel 9500 4ft 11G	VHLP4-11-SE1			\$	200.00	Abandon	2/1/2019
PA	Orthopedic Institute of PA	OIP - Main Camp Hill	Antenna - Alcatel 9500 4ft 11G	Antenna - Alcatel 9500 4ft 11G	VHLP800-11			\$	200.00	Abandon	2/1/2019
PA	Penn Cambria School District	Penn Cambria SD - HS	Alcatel 6212	Alcatel 6212	LS-6212	J418A027		\$	500.00	Abandon	1/28/2019
PA	Penn Cambria School District	Penn Cambria SD - MS	Alcatel 6212	Alcatel 6212	LS-6212	J418A109		\$	500.00	Abandon	1/28/2019

PA	Penn Cambria School District	Penn Cambria SD - Primary School	Alcatel 6212	Alcatel 6212	LS-6212	J448A134		\$	500.00	Abandon	1/28/2019
PA	Penn Cambria School District	Penn Cambria SD - Intermediate School	Alcatel 6224	Alcatel 6224	LS-6224	J428A441		\$	500.00	Abandon	1/28/2019
PA	Penn Cambria School District	Penn Cambria SD - HS	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0828M180		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - Intermediate School	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0828M164		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - Intermediate School	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0828M162		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - MS	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0828M178		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - Primary School	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0828M173		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - Intermediate School	Alcatel 9500MXC ODU 18G High	Alcatel 9500MXC ODU 18G High	Alcatel ODU 300 HP	EBT07011667		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - MS	Alcatel 9500MXC ODU 18G High	Alcatel 9500MXC ODU 18G High	Alcatel ODU 300 HP	EBT0902R251		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - HS	Alcatel 9500MXC ODU 23G High	Alcatel 9500MXC ODU 23G High	Alcatel ODU 300 HP	EBT0829A015		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - Intermediate School	Alcatel 9500MXC ODU 23G High	Alcatel 9500MXC ODU 23G High	Alcatel ODU 300 HP	EBT0829A016		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - Primary School	Alcatel 9500MXC ODU 23G Low	Alcatel 9500MXC ODU 23G Low	Alcatel ODU 300 HP	EBT0920P537		\$	700.00	Abandon	1/31/2019
PA	Penn Cambria School District	Penn Cambria SD - HS	Antenna - Alcatel 9500 1ft 23G	Antenna - Alcatel 9500 1ft 23G	VHLP1-23			\$	150.00	Abandon	2/1/2019
PA	Penn Cambria School District	Penn Cambria SD - Intermediate School	Antenna - Alcatel 9500 1ft 23G	Antenna - Alcatel 9500 1ft 23G	VHLP1-23			\$	150.00	Abandon	2/1/2019
PA	Penn Cambria School District	Penn Cambria SD - Primary School	Antenna - Alcatel 9500 1ft 23G	Antenna - Alcatel 9500 1ft 23G	VHLP1-23			\$	150.00	Abandon	2/1/2019
PA	Penn Cambria School District	Penn Cambria SD - Intermediate School	Antenna - Alcatel 9500 2ft 18G	Antenna - Alcatel 9500 2ft 18G	VHLP2-18-SE1			\$	150.00	Abandon	2/1/2019
PA	Penn Cambria School District	Penn Cambria SD - MS	Antenna - Alcatel 9500 2ft 18G	Antenna - Alcatel 9500 2ft 18G	VHLP2-18-SE1			\$	150.00	Abandon	2/1/2019
PA	Penn Cambria School District	Penn Cambria SD - Intermediate School	Cabinet	Cabinet	Cabinet			\$	150.00	Abandon	1/31/2019
PA	Penn Highlands Healthcare	PHH - Penn Highlands DuBois	Alcatel 6212	Alcatel 6212	LS-6212	J448A468		\$	500.00	Abandon	1/28/2019
PA	Pennsylvania College of Art and Design	PCAD - Lancaster	Ciena 3916	Ciena 3916	3916	M8742111	PA-001801	\$	400.00	Abandon	1/30/2019
PA	PMHRD	PMHRD - Administration	Alcatel 6212	Alcatel 6212	LS-6212	J448A258		\$	500.00	Abandon	1/28/2019
PA	PMHRD	PMHRD - Bradford Regional Medical Center	Alcatel 6212	Alcatel 6212	LS-6212	J518A099		\$	500.00	Abandon	1/28/2019
PA	PMHRD	PMHRD - Jersey Shore Hospital	Alcatel 6212	Alcatel 6212	LS-6212	L428B133		\$	500.00	Abandon	1/28/2019
PA	PMHRD	PMHRD - Punxsutawney Hospital	Alcatel 6212	Alcatel 6212	LS-6212	J518A165		\$	500.00	Abandon	1/28/2019
PA	PMHRD	PMHRD - Endless Mountains Health Systems	Alcatel 6224	Alcatel 6224	LS-6224	H498B653		\$	500.00	Abandon	1/28/2019
PA	PMHRD	PMHRD - Health Services of Clarion - Clarion Women's	Alcatel 6224	Alcatel 6224	LS-6224	H498B761		\$	500.00	Abandon	1/28/2019
PA	PMHRD	PMHRD - Health Services of Clarion - Marianne - Marianne	Alcatel 6224	Alcatel 6224	LS-6224	H2484881		\$	500.00	Abandon	1/28/2019
PA	PMHRD	PMHRD - Clarion County Career Center	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	H1782106		\$	650.00	Abandon	1/28/2019
PA	PMHRD	PMHRD - Clarion Hospital	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	G2552256		\$	650.00	Abandon	1/28/2019
PA	PMHRD	PMHRD - Punxsutawney Hospital	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0839H727		\$	700.00	Abandon	1/31/2019
PA	PMHRD	PMHRD - Punxsutawney Hospital	Alcatel 9500MXC ODU 18G High	Alcatel 9500MXC ODU 18G High	Alcatel ODU 300 HP	EBT0843R933		\$	700.00	Abandon	1/31/2019
PA	PMHRD	PMHRD - Punxsutawney Hospital	Antenna - Alcatel 9500 2ft 18G	Antenna - Alcatel 9500 2ft 18G	VHLP2-18-SE1			\$	700.00	Abandon	2/1/2019
PA	PMHRD	PMHRD - Health Services of Clarion - Brookville - Semeyn	Ciena 3916	Ciena 3916	3916	M8535305	PA-001720	\$	400.00	Abandon	1/30/2019
PA	PMHRD	PMHRD - Health Services of Clarion - Fairmount City -	Ciena 3916	Ciena 3916	3916	M8535352	PA-001722	\$	400.00	Abandon	1/30/2019
PA	PMHRD	PMHRD - Titusville Area Hospital	Ciena 3916	Ciena 3916	3916	M8535355	PA-001701	\$	400.00	Abandon	1/30/2019
PA	PMHRD	PMHRD - Towanda Memorial Hospital	Ciena 3916	Ciena 3916	3916	M7438313	PA-001698	\$	400.00	Abandon	1/30/2019
PA	PMHRD	PMHRD - Towanda Memorial Hospital	Ciena 3916	Ciena 3916	3916	M7438315	PA-001697	\$	400.00	Abandon	1/30/2019
PA	PMHRD	PMHRD - Endless Mountains Health Systems	Cisco 2901 Router	Cisco 2901 Router	C2901	FGL16292695		\$	300.00	Abandon	1/31/2019
PA	Radio Adventures Corp dba CSOnline	Radio Adventures - Seneca	Alcatel 6212	Alcatel 6212	LS-6212	K078A320		\$	400.00	Abandon	1/28/2019
PA	Riggs Industries	Riggs - J & J Truck Bodies & Trailers	Alcatel 6224	Alcatel 6224	LS-6224	H498B620		\$	400.00	Abandon	1/28/2019
PA	Riggs Industries	Riggs - J & J Truck Boswell	Alcatel 6224	Alcatel 6224	LS-6224	H498B565		\$	400.00	Abandon	1/28/2019
PA	Riggs Industries	Riggs - J & J Truck Bodies & Trailers	Alvarion LB5830 IDU	Alvarion LB5830 IDU		000902001656		Unknown	Abandon	2/1/2019	
PA	Riggs Industries	Riggs - J & J Truck Bodies & Trailers	Alvarion LB5830 ODU	Alvarion LB5830 ODU				Unknown	Abandon	2/1/2019	
PA	Riggs Industries	Riggs - J & J Truck Equipment (Lincoln Supply)	Alvarion RB-B14-5.8	Alvarion RB-B14-5.8		0010E7A41323		Unknown	Abandon	2/1/2019	
PA	Riggs Industries	Riggs - J & J Truck Boswell	Alvarion SU-54-BD-5.8	Alvarion SU-54-BD-5.8		6808260	PA-002089	Unknown	Abandon	2/1/2019	
PA	Riggs Industries	Riggs - J & J Truck Error Hill Farm	Alvarion SU-54-BD-5.8	Alvarion SU-54-BD-5.8		0010E74424CA		Unknown	Abandon	2/1/2019	
PA	Riggs Industries	Riggs - J & J Truck Boswell	Antenna - 2ft 5.8G	Antenna - 2ft 5.8G	PX2F-52	156700	PA-002088	\$	150.00	Abandon	2/1/2019
PA	Riggs Industries	Riggs - J & J Truck Equipment (Lincoln Supply)	Antenna - 2ft 5.8G	Antenna - 2ft 5.8G	PX2F-52			\$	150.00	Abandon	2/1/2019
PA	Somerset County Technology Center	Somerset CTC - Somerset	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0839H665		\$	700.00	Abandon	2/13/2019
PA	Somerset County Technology Center	Somerset CTC - Somerset	Alcatel 9500MXC ODU 18G High	Alcatel 9500MXC ODU 18G High	Alcatel ODU 300 HP	EBT0902R336		\$	700.00	Abandon	2/13/2019
PA	Somerset County Technology Center	Somerset CTC - Somerset	Antenna - Alcatel 9500 2ft 18G	Antenna - Alcatel 9500 2ft 18G		tbd		\$	150.00	Abandon	2/13/2019
PA	Somerset County Technology Center	Somerset CTC - Somerset	Cisco SPA122 ATA	Cisco SPA122 ATA	SPA122 V02	CCQ174605NM	PA-001575	Unknown	Abandon	1/31/2019	
PA	Somerset County Technology Center	Somerset CTC - Somerset	Edgemarc 4570-30	Edgemarc 4570-30	4570-100-0030	H5144503001	PA-001426	Unknown	Abandon	1/30/2019	
PA	Somerset County Technology Center	Somerset CTC - Somerset	FortiGate-60D	FortiGate-60D	FG-60D	FGT60D04613000844		\$	400.00	Abandon	1/29/2019
PA	Somerset County Technology Center	Somerset CTC - Somerset	Swann NVR	Swann NVR	SWNHD-820CAM	SWNHD		Unknown	Abandon	2/1/2019	
PA	Southern Fulton School District	IU11 - Southern Fulton SD - Southern Fulton ES	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0828M185		\$	700.00	Abandon	1/31/2019
PA	Southern Fulton School District	IU11 - Southern Fulton SD - Southern Fulton ES	Alcatel 9500MXC ODU 11G Low	Alcatel 9500MXC ODU 11G Low	Alcatel ODU 300 HP	EBT06274273		\$	700.00	Abandon	1/31/2019
PA	Southern Fulton School District	IU11 - Southern Fulton SD - Southern Fulton ES	Antenna - Alcatel 9500 3ft 11G	Antenna - Alcatel 9500 3ft 11G	VHLP800-11-SE1		PA-002363	\$	150.00	Abandon	2/1/2019
PA	Southern Fulton School District	IU11 - Southern Fulton SD - Junior-Senior HS	APC UPS	APC UPS	Smart-UPS 750 RM	AS0424110813		\$	500.00	Abandon	1/30/2019
PA	Southern Fulton School District	IU11 - Southern Fulton SD - Junior-Senior HS	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121525		\$	500.00	Abandon	1/29/2019
PA	Southern Fulton School District	IU11 - Southern Fulton SD - Southern Fulton ES	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121650		\$	500.00	Abandon	1/29/2019
PA	Southern Huntingdon County School District	IU11 - Southern Huntingdon Cty SD - Junior-Senior HS	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121635		\$	500.00	Abandon	1/29/2019
PA	Southern Huntingdon County School District	IU11 - Southern Huntingdon Cty SD - Junior-Senior HS	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121669		\$	500.00	Abandon	1/29/2019
PA	Southern Huntingdon County School District	IU11 - Southern Huntingdon Cty SD - Rockhill ES	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121647		\$	500.00	Abandon	1/29/2019
PA	Southern Huntingdon County School District	IU11 - Southern Huntingdon Cty SD - Shade Gap ES	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121609		\$	500.00	Abandon	1/29/2019
PA	Southern Huntingdon County School District	IU11 - Southern Huntingdon Cty SD - Spring Farms ES	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121658		\$	500.00	Abandon	1/29/2019
PA	Time Warner Cable - Customer	TWC - Edinboro Medical Center	Alcatel 6212	Alcatel 6212	LS-6212	K068A836		\$	400.00	Abandon	1/28/2019
PA	Time Warner Cable - Customer	TWC - Warren General Hospital	Alcatel 6212	Alcatel 6212	LS-6212			\$	400.00	Abandon	1/28/2019
PA	Time Warner Cable - Customer	TWC - Youngsville Medical Center	Alcatel 6212	Alcatel 6212	LS-6212			\$	400.00	Abandon	1/28/2019
PA	Tuscarora IU 11	IU11 - Mifflin County Christian Academy	Alcatel 6212	Alcatel 6212	LS-6212	L428B112	PA-000194	\$	400.00	Abandon	1/28/2019
PA	Tuscarora IU 11	IU11 - Forbes Road SD	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0828M157		\$	700.00	Abandon	1/31/2019
PA	Tuscarora IU 11	IU11 - Trough Creek Youth Forestry Camp	Alcatel 9500MXC IDU ES + 8x	Alcatel 9500MXC IDU ES + 8x		EBT0828M171		\$	700.00	Abandon	1/31/2019
PA	Tuscarora IU 11	IU11 - Trough Creek Youth Forestry Camp	Alcatel 9500MXC ODU 11G High	Alcatel 9500MXC ODU 11G High	Alcatel ODU 300 HP	EBT0825D665		\$	700.00	Abandon	1/31/2019
PA	Tuscarora IU 11	IU11 - Forbes Road SD	Alcatel 9500MXC ODU 18G Low	Alcatel 9500MXC ODU 18G Low	Alcatel ODU 300 HP	EBT06402930		\$	700.00	Abandon	1/31/2019

PA	Tuscarora IU 11	IU11 - Forbes Road SD	Antenna - Alcatel 9500 2ft 18G	Antenna - Alcatel 9500 2ft 18G	VHLP2-18-SE1			\$	200.00	Abandon	2/1/2019
PA	Tuscarora IU 11	IU11 - Trough Creek Youth Forestry Camp	Antenna - Alcatel 9500 3ft 11G	Antenna - Alcatel 9500 3ft 11G	VHLP800-11-SE1			\$	200.00	Abandon	2/1/2019
PA	Tuscarora IU 11	IU11 - Belleville Mennonite School	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121626		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Calvary Christian Academy	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121646	PA-000217	\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Central Fulton SD	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121649		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Forbes Road SD	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121659		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Juniata Mennonite School	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121680		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Juniata Valley SD	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121654		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Mifflin County CTC	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121572		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Mifflin County SD - Admin Building	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121667		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Mount Union Annex	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121679		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - New Day Charter School	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121625		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - South Mountain Secure Treatment Center	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121645	PA-001432	\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Trough Creek Youth Forestry Camp	Telco Systems 340	Telco Systems 340	TMC-340-NA	0314121629		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Huntingdon County CTC	Telco Systems 340F	Telco Systems 340F	T-Marc 340F	0314191056		\$	500.00	Abandon	1/29/2019
PA	Tuscarora IU 11	IU11 - Tuscarora IU 11 Main (HQ/POP)	Telco Systems 7124S	Telco Systems 7124S	T-Marc 7124S	0314030280		\$	500.00	Abandon	1/29/2019
PA	Venango County	Venango County - Court House	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	G2552248		\$	400.00	Abandon	1/28/2019
PA	Venango County	Venango County - Jail House	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	H1782165		\$	400.00	Abandon	1/28/2019
PA	WestPA.net, Inc.	WestPA.net - WICU Ch 12 TV	Alcatel 6850-24	Alcatel 6850-24	OS-6850-24	H4982473		\$	400.00	Abandon	1/28/2019
PA	West Perry School District	West Perry SD - Blain ES	Ciena 3904	Ciena 3904	3904	M8120489	PA-001652	\$	400.00	Abandon	1/30/2019
PA	West Perry School District	West Perry SD - Carroll ES	Ciena 3904	Ciena 3904	3904	M8152020	PA-001654	\$	400.00	Abandon	1/30/2019
PA	West Perry School District	West Perry SD - HS	Ciena 3904	Ciena 3904	3904	M8111933	PA-001651	\$	400.00	Abandon	1/30/2019
PA	West Perry School District	West Perry SD - New Bloomfield ES	Ciena 3904	Ciena 3904	3904	M8120499	PA-001653	\$	400.00	Abandon	1/30/2019
								\$	127,850.00		

Schedule B, Part 9, Question 55

AFFINITI PA, LLC - REAL PROPERTY ASSETS - TOWERS

Site Name	Site Address	City	State	Zip Code	Latitude	Longitude	Structure Type	AGL (ft)	Active	Existence	County	School?	Status
Affiniti - Cave Hill	No Street Address	Three Springs	PA	17264	40.1858333	-77.9912222	Self Support Tower	140	No	Yes	Huntingdon	NO	
Affiniti - Field 3	No Street Address	Flinton	PA	16640	40.715056	-78.513194	Guyed Tower	150	No	Yes	Cambria	NO	Abandoned
Affiniti - Rosebud	No Street Address	Coalport	PA	16627	40.7508333	-78.5432778	Guyed Tower	150	No	Yes	Clearfield	NO	Abandoned
Affiniti - Tionesta Cemetary	Mt Collins Cemetary Rt 62	Tionesta	PA	16353	41.4888888	-79.4630555	Self Support Tower	120	No	Yes	Forest	NO	
IU11 - Fulton County Christian	8159 Great Sove Rd	Needmore	PA	17238	39.848881	-78.144193	Self Support Tower	120	No	Yes	Fulton	YES	
IU11 - Shade Gap ES	22251 Shade Valley Rd.	Shade Gap	PA	17255	40.184029	-77.860413	Self Support Tower	120	No	Yes	Huntingdon	YES	
New Enterprise Stone - Limeville	520 Lime Quarry Rd	Gap	PA	17527	40.011653	-75.969405	Self Support Tower	120	No	Yes	Lancaster	NO	
Penn Cambria - Primary School	400 Main St.	Lilly	PA	15938	40.420892	-78.626459	Self Support Tower	120	No	Yes	Cambria	YES	

Schedule B, Part 10, Question #64

Customer_ID	Customer_Name	Customer_Class	DocType	dOCDATE	dUEDATE	DOCNUMBR	nt	Amount Due		Days	Outstandi	ng	Aging	Collection Path	Check Date Paid	Number	Amount Paid	Current Amount
								Original_amou	as of									
Brander Group	Brander Group	PA-CUST	Invoice	10/28/2019	11/15/2019	10282019	agr	61,440.00	61,440.00	-	Current						-	61,440.00
IDS-PA	Internet Data Services, Inc.	PA-CUST	Invoice	6/30/2019	7/30/2019	SLS 395		30,720.00	30,720.00	108	Over 90	Bankruptcy						30,720.00
Total																		92,160.00

Schedule B, Part 3, Question 11

Customer_ID	Customer _Name	Customer _Class	DocType	dOCDATE	dUEDATE	DOCNUMBR	Original_ amount	Amount Due as of 7/30/19	Days Outstandi ng	Aging	Collection Path	Date Paid	Check Number	Amount Paid	Current Amount
A-IU8SLD-PA	Appalachia PA-USAC	Invoice	7/17/2018	8/16/2018	INV0000000010506	38,344.95	1,489.66	456	Over 90	Bankruptcy					1,489.66
BKASR-PA	Blue Knob PA-CUST	Invoice	5/1/2019	5/31/2019	INV0000000012935	750.00	750.00	168	Over 90	Bankruptcy					750.00
BKASR-PA	Blue Knob PA-CUST	Invoice	6/1/2019	7/1/2019	INV0000000013125	750.00	750.00	137	Over 90	Bankruptcy					750.00
EVERLINK-PA	Evenlink PA-CUST	Invoice	4/1/2019	5/1/2019	INV0000000012752	1,000.00	1,000.00	198	Over 90	Bankruptcy					1,000.00
EVERLINK-PA	Evenlink PA-CUST	Invoice	5/1/2019	5/31/2019	INV0000000012948	1,000.00	1,000.00	168	Over 90	Bankruptcy					1,000.00
EVERLINK-PA	Evenlink PA-CUST	Invoice	6/1/2019	7/1/2019	INV0000000013137	1,000.00	1,000.00	137	Over 90	Bankruptcy					1,000.00
MWU4-PA	Midwester PA-CUST	Invoice	9/1/2018	10/1/2018	INV0000000011052	3,153.96	3,153.96	410	Over 90	Bankruptcy					3,153.96
MWU4SLD-PA	Midwester PA-USAC	Invoice	6/5/2018	7/5/2018	INV0000000010122	39,921.73	3,658.24	498	Over 90	Bankruptcy					3,658.24
NROCBROADBND-PA	Noroc Broa PA-CUST	Invoice	6/1/2019	7/1/2019	INV0000000013166	1,250.00	1,250.00	137	Over 90	Bankruptcy					1,250.00
NRTHRNPTTER-PA	Northern P PA-CUST	Invoice	3/1/2019	3/31/2019	INV0000000012480	150.00	150.00	229	Over 90	Bankruptcy					150.00
NRTHRNPTTER-PA	Northern P PA-CUST	Invoice	3/18/2019	4/17/2019	SLS 339	4,294.87	4,294.87	212	Over 90	Bankruptcy					4,294.87
PMHRD-PA	PMHRD PA-CUST-H	Invoice	2/1/2019	3/18/2019	INV0000000012398	1,176.75	642.33	242	Over 90	Bankruptcy					642.33
PMHRD-PA	PMHRD PA-CUST-H	Invoice	2/1/2019	3/18/2019	INV0000000012399	1,750.00	953.75	242	Over 90	Bankruptcy					953.75
PMHRD-PA	PMHRD PA-CUST-H	Invoice	2/1/2019	3/18/2019	INV0000000012400	8,687.25	4,728.30	242	Over 90	Bankruptcy					4,728.30
PMHRD-PA	PMHRD PA-CUST-H	Invoice	2/1/2019	3/18/2019	INV0000000012415	1,275.00	790.74	242	Over 90	Bankruptcy					790.74
PMHRD-PA	PMHRD PA-CUST-H	Invoice	2/1/2019	3/18/2019	INV0000000012396	3,806.25	2,074.41	242	Over 90	Bankruptcy					2,074.41
PMHRD-PA	PMHRD PA-CUST-H	Invoice	2/1/2019	3/18/2019	INV0000000012397	2,178.38	1,187.22	242	Over 90	Bankruptcy					1,187.22
PMHRD-PA	PMHRD PA-CUST-H	Invoice	3/1/2019	4/15/2019	INV0000000012597	3,806.25	2,074.41	214	Over 90	Bankruptcy					2,074.41
PMHRD-PA	PMHRD PA-CUST-H	Invoice	3/1/2019	4/15/2019	INV0000000012598	2,178.38	1,654.73	214	Over 90	Bankruptcy					1,654.73
PMHRD-PA	PMHRD PA-CUST-H	Invoice	3/1/2019	4/15/2019	INV0000000012600	1,750.00	953.75	214	Over 90	Bankruptcy					953.75
PMHRD-PA	PMHRD PA-CUST-H	Invoice	3/1/2019	4/15/2019	INV0000000012601	8,687.25	4,903.12	214	Over 90	Bankruptcy					4,903.12
PMHRD-PA	PMHRD PA-CUST-H	Invoice	3/1/2019	4/15/2019	INV0000000012603	1,275.00	730.74	214	Over 90	Bankruptcy					730.74
PMHRD-PA	PMHRD PA-CUST-H	Payment	3/8/2019	1/1/1900	PYMNT00013845	(51,868.22)	(3,268.46)	43,783	Over 90	Bankruptcy					(3,268.46)
PMHRD-PA	PMHRD PA-CUST-H	Invoice	4/1/2019	5/16/2019	INV0000000012818	3,806.25	2,074.41	183	Over 90	Bankruptcy					2,074.41
PMHRD-PA	PMHRD PA-CUST-H	Invoice	4/1/2019	5/16/2019	INV0000000012819	2,178.38	1,187.22	183	Over 90	Bankruptcy					1,187.22
PMHRD-PA	PMHRD PA-CUST-H	Invoice	4/1/2019	5/16/2019	INV0000000012820	1,176.75	642.33	183	Over 90	Bankruptcy					642.33
PMHRD-PA	PMHRD PA-CUST-H	Invoice	4/1/2019	5/16/2019	INV0000000012821	1,750.00	953.75	183	Over 90	Bankruptcy					953.75
PMHRD-PA	PMHRD PA-CUST-H	Invoice	4/1/2019	5/16/2019	INV0000000012822	8,687.25	4,728.30	183	Over 90	Bankruptcy					4,728.30
PMHRD-PA	PMHRD PA-CUST-H	Invoice	4/1/2019	5/16/2019	INV0000000012823	1,275.00	730.74	183	Over 90	Bankruptcy					730.74
PMHRD-PA	PMHRD PA-CUST-H	Credit Me	4/1/2019	4/1/2019	INV0000000013028	(356.24)	(356.24)	228	Over 90	Bankruptcy					(356.24)
PMHRD-PA	PMHRD PA-CUST-H	Payment	4/23/2019	1/1/2019	PYMNT00014163	(2,119.26)	(2,119.26)	318	Over 90	Bankruptcy					(2,119.26)
PMHRD-PA	PMHRD PA-CUST-H	Invoice	5/1/2019	6/15/2019	INV0000000013010	2,178.38	2,178.38	153	Over 90	Bankruptcy					2,178.38
PMHRD-PA	PMHRD PA-CUST-H	Invoice	5/1/2019	6/15/2019	INV0000000013011	1,176.75	1,176.75	153	Over 90	Bankruptcy					1,176.75
PMHRD-PA	PMHRD PA-CUST-H	Invoice	5/1/2019	6/15/2019	INV0000000013012	1,750.00	1,750.00	153	Over 90	Bankruptcy					1,750.00
PMHRD-PA	PMHRD PA-CUST-H	Invoice	5/1/2019	6/15/2019	INV0000000013013	8,687.25	8,687.25	153	Over 90	Bankruptcy					8,687.25
PMHRD-PA	PMHRD PA-CUST-H	Credit Me	5/1/2019	5/1/2019	INV0000000013029	(2,137.50)	(2,137.50)	198	Over 90	Bankruptcy					(2,137.50)
PMHRD-PA	PMHRD PA-CUST-H	Invoice	5/1/2019	6/15/2019	INV0000000013009	3,806.25	3,806.25	153	Over 90	Bankruptcy					3,806.25
PMHRD-PA	PMHRD PA-CUST-H	Invoice	5/1/2019	6/15/2019	INV0000000013014	1,275.00	730.74	153	Over 90	Bankruptcy					730.74
PMHRD-PA	PMHRD PA-CUST-H	Invoice	6/1/2019	7/16/2019	INV0000000013210	3,806.25	3,806.25	122	Over 90	Bankruptcy					3,806.25
PMHRD-PA	PMHRD PA-CUST-H	Invoice	6/1/2019	7/16/2019	INV0000000013211	2,178.38	2,178.38	122	Over 90	Bankruptcy					2,178.38
PMHRD-PA	PMHRD PA-CUST-H	Invoice	6/1/2019	7/16/2019	INV0000000013212	1,176.75	1,176.75	122	Over 90	Bankruptcy					1,176.75
PMHRD-PA	PMHRD PA-CUST-H	Invoice	6/1/2019	7/16/2019	INV0000000013213	1,750.00	1,750.00	122	Over 90	Bankruptcy					1,750.00
PMHRD-PA	PMHRD PA-CUST-H	Invoice	6/1/2019	7/16/2019	INV0000000013214	6,649.75	6,549.75	122	Over 90	Bankruptcy					6,549.75
PMHRD-PA	PMHRD PA-CUST-H	Invoice	6/1/2019	7/16/2019	INV0000000013215	1,275.00	1,275.00	122	Over 90	Bankruptcy					1,275.00
PMHRD-PA	PMHRD PA-CUST-H	Payment	6/30/2019	9/3/2019	PYMNT001585	(8,012.61)	(8,021.61)	73	61 to 90	Bankruptcy		9/24/2019 1585			(8,021.61)
PMHRD-PA	PMHRD PA-CUST-HCF		6/30/2019	9/3/2019	PYMNT001585	(544.26)	(544.26)	73	61 to 90	Bankruptcy		9/24/2019 1585			(544.26)
Total															68,125.15

Debtor **Affiniti PA, LLC**
Name

Case number (If known)

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$436,697.53</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$68,125.15</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$127,850.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<div><u>\$0.00</u></div>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$92,160.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$100,000.00</u>	
91. Total. Add lines 80 through 90 for each column	<div><u>\$824,832.68</u></div>	+ 91b. <div><u>\$0.00</u></div>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<div><u>\$824,832.68</u></div>

Fill in this information to identify the case:Debtor name **Affiniti PA, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Global Leverage Capital Credit <small>Creditor's Name</small> Opportunity Fund I (GLC) 451 Jackson Street 2nd Floor San Francisco, CA 94111 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred 03/31/2014 Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien All Affiniti Assets Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$13,470,604.38	\$0.00

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$13,470,604.
38
Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name **Affiniti PA, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Commonwealth of Pennsylvania PO Box 280427 Harrisburg, PA 17128	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,600.00	\$1,600.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address PA Department of Revenue PO Box 280427 Harrisburg, PA 17128-0427	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,233.65	\$6,233.65
	Date or dates debt was incurred 11/01/2019	Basis for the claim: Lien filed on 08/21/2019. Docket #2019-08471		
	Last 4 digits of account number 8820	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Affiniti PA, LLC**
Name

Case number (if known)

2.3	Priority creditor's name and mailing address Shade Township Attn: Cynthia J. Walters PO Box 169 Cairnbrook, PA 15924	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$726.17	\$726.17
Date or dates debt was incurred 01/10/2019		Basis for the claim:		
Last 4 digits of account number 8259		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)				

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address American Legion of Foxburg - PA P.O. Box 348 Route 58 Foxburg, PA 16036-0348 Date(s) debt was incurred 9/1/2018 0:00 Last 4 digits of account number Affiniti PA/STING	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.2	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred 10/1/2018 0:00 Last 4 digits of account number 3172	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,056.78
3.3	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred 11/30/2018 0:00 Last 4 digits of account number 3172	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,336.73
3.4	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred 12/28/2018 0:00 Last 4 digits of account number 3172	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,336.73
3.5	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred 1/1/2019 0:00 Last 4 digits of account number 3172	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,336.73

Debtor **Affiniti PA, LLC**
Name

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3.6	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,169.95
3.7	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,254.00
3.8	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,056.78
3.9	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$856.00
3.10	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,254.00
3.11	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,056.78
3.12	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$856.00

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3.13	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>3/20/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,169.95
3.14	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,169.95
3.15	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,254.00
3.16	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,056.78
3.17	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$856.00
3.18	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,169.95
3.19	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,254.00

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3.20	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,056.78
3.21	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$856.00
3.22	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,494.20
3.23	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,169.95
3.24	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,254.00
3.25	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,056.78
3.26	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$856.00

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3.27	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,172.76
3.28	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,262.58
3.29	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,063.94
3.30	Nonpriority creditor's name and mailing address American Tower, LP -93172 -PA 29637 Network Place Chicago, IL 60673-1296 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$856.00
3.31	Nonpriority creditor's name and mailing address Armstrong-1283-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>9301</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,207.95
3.32	Nonpriority creditor's name and mailing address Armstrong-1283-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>5/31/2019 0:00</u> Last 4 digits of account number <u>9301</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$109.15
3.33	Nonpriority creditor's name and mailing address Armstrong-1283-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>8301</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$707.95

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3.34	Nonpriority creditor's name and mailing address Armstrong-1283-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>8301</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,207.95
3.35	Nonpriority creditor's name and mailing address Armstrong-1283-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>8301</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,207.95
3.36	Nonpriority creditor's name and mailing address Armstrong-1283-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>5/31/2019 0:00</u> Last 4 digits of account number <u>8301</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,361.30
3.37	Nonpriority creditor's name and mailing address Armstrong-1286-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>8601</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,888.70
3.38	Nonpriority creditor's name and mailing address Armstrong-1286-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>8601</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,207.95
3.39	Nonpriority creditor's name and mailing address Armstrong-1286-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>8601</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,207.95
3.40	Nonpriority creditor's name and mailing address Armstrong-1288-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>8801</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$956.29

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3.41	Nonpriority creditor's name and mailing address Armstrong-1288-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>8801</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,107.95</u>
3.42	Nonpriority creditor's name and mailing address Armstrong-1288-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>8801</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,107.95</u>
3.43	Nonpriority creditor's name and mailing address Armstrong-1289-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>8901</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,909.60</u>
3.44	Nonpriority creditor's name and mailing address Armstrong-1289-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>8901</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,207.95</u>
3.45	Nonpriority creditor's name and mailing address Armstrong-1289-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>8901</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,207.95</u>
3.46	Nonpriority creditor's name and mailing address Armstrong-1290-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>9001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,123.30</u>
3.47	Nonpriority creditor's name and mailing address Armstrong-1290-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>9001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,207.95</u>

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3.48	Nonpriority creditor's name and mailing address Armstrong-1290-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>9001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,207.95
3.49	Nonpriority creditor's name and mailing address Armstrong-1298-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>9801</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,107.95
3.50	Nonpriority creditor's name and mailing address Armstrong-1298-PA 437 N. Main St. Butler, PA 16001-4358 Date(s) debt was incurred <u>5/31/2019 0:00</u> Last 4 digits of account number <u>9801</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$76.70
3.51	Nonpriority creditor's name and mailing address Atlantic Broadband -5870 P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>5870</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$950.00
3.52	Nonpriority creditor's name and mailing address Atlantic Broadband -5870 P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>6/10/2019 0:00</u> Last 4 digits of account number <u>5870</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$406.13
3.53	Nonpriority creditor's name and mailing address Atlantic Broadband 7698-pa P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>5/2/2019 0:00</u> Last 4 digits of account number <u>7690</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,250.00
3.54	Nonpriority creditor's name and mailing address Atlantic Broadband 7698-pa P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>6/3/2019 0:00</u> Last 4 digits of account number <u>7690</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,255.00

3.55	Nonpriority creditor's name and mailing address Atlantic Broadband 9728 P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>5/25/2019 0:00</u> Last 4 digits of account number <u>9720</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,393.00
3.56	Nonpriority creditor's name and mailing address Atlantic Broadband 9728 P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>6/25/2019 0:00</u> Last 4 digits of account number <u>9720</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,405.00
3.57	Nonpriority creditor's name and mailing address Atlantic Broadband-1016-PA P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>6/3/2018 0:00</u> Last 4 digits of account number <u>1016</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$595.04
3.58	Nonpriority creditor's name and mailing address Atlantic Broadband-3074 P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>6/1/2018 0:00</u> Last 4 digits of account number <u>3074</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.09
3.59	Nonpriority creditor's name and mailing address Atlantic Broadband-3074 P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>3074</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.60	Nonpriority creditor's name and mailing address Atlantic Broadband-3349-PA P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>5/3/2019 0:00</u> Last 4 digits of account number <u>3349</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,250.00
3.61	Nonpriority creditor's name and mailing address Atlantic Broadband-3349-PA P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>6/3/2019 0:00</u> Last 4 digits of account number <u>3349</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,255.00

Debtor	Affiniti PA, LLC Name	Case number (if known) _____
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3.62	Nonpriority creditor's name and mailing address Atlantic Broadband-4047-PA P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>5/3/2019 0:00</u> Last 4 digits of account number <u>4047</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.63	Nonpriority creditor's name and mailing address Atlantic Broadband-4047-PA P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>6/3/2019 0:00</u> Last 4 digits of account number <u>4047</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,005.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.64	Nonpriority creditor's name and mailing address Atlantic Broadband-5692-PA P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>5/3/2019 0:00</u> Last 4 digits of account number <u>5692</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$750.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.65	Nonpriority creditor's name and mailing address Atlantic Broadband-5692-PA P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>6/3/2019 0:00</u> Last 4 digits of account number <u>5692</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$755.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.66	Nonpriority creditor's name and mailing address Atlantic Broadband-8481 P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>6/8/2019 0:00</u> Last 4 digits of account number <u>8480</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$750.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.67	Nonpriority creditor's name and mailing address Atlantic Broadband-8481 P.O. Box 371801 Pittsburgh, PA 15250-7801 Date(s) debt was incurred <u>7/8/2019 0:00</u> Last 4 digits of account number <u>8480</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$755.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.68	Nonpriority creditor's name and mailing address Centre Communication Inc P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>10/31/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$758.92 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.69	Nonpriority creditor's name and mailing address Centre Communication Inc P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>12/15/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.20
3.70	Nonpriority creditor's name and mailing address Centre Communication Inc P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>12/15/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$758.92
3.71	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>11/30/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$758.92
3.72	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>1/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$758.92
3.73	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>1/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.20
3.74	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>2/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$758.92
3.75	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>2/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.20

Name

3.76	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>3/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$758.92
3.77	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>3/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.20
3.78	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>4/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.20
3.79	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>4/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$758.92
3.80	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>5/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.20
3.81	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>5/15/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$758.92
3.82	Nonpriority creditor's name and mailing address CENTRE TOWER SERVICES, INC P.O. Box 119 Bellefonte, PA 16823 Date(s) debt was incurred <u>6/30/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.20

Name

3.83 Nonpriority creditor's name and mailing address

CENTRE TOWER SERVICES, INC
P.O. Box 119
Bellefonte, PA 16823Date(s) debt was incurred 6/30/2019 0:00Last 4 digits of account number Affiniti PAAs of the petition filing date, the claim is: *Check all that apply.***\$758.92**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

3.84 Nonpriority creditor's name and mailing address

Century Link 0286-PA
P.O. Box 1319
Charlotte, NC 28201-1319Date(s) debt was incurred 4/16/2019 0:00Last 4 digits of account number 9375As of the petition filing date, the claim is: *Check all that apply.***\$16,506.32**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

3.85 Nonpriority creditor's name and mailing address

Century Link 0286-PA
P.O. Box 1319
Charlotte, NC 28201-1319Date(s) debt was incurred 5/1/2019 0:00Last 4 digits of account number 9375As of the petition filing date, the claim is: *Check all that apply.***\$16,506.32**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

3.86 Nonpriority creditor's name and mailing address

Century Link 0286-PA
P.O. Box 1319
Charlotte, NC 28201-1319Date(s) debt was incurred 6/16/2019 0:00Last 4 digits of account number 9375As of the petition filing date, the claim is: *Check all that apply.***\$16,506.32**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

3.87 Nonpriority creditor's name and mailing address

Century Link 2419 PA
P.O. Box 1319
Charlotte, NC 28201-1319Date(s) debt was incurred 4/12/2019 0:00Last 4 digits of account number 9375As of the petition filing date, the claim is: *Check all that apply.***\$1.00**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

3.88 Nonpriority creditor's name and mailing address

Century Link 2419 PA
P.O. Box 1319
Charlotte, NC 28201-1319Date(s) debt was incurred 5/1/2019 0:00Last 4 digits of account number 9375As of the petition filing date, the claim is: *Check all that apply.***\$842.34**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

3.89 Nonpriority creditor's name and mailing address

Century Link 2419 PA
P.O. Box 1319
Charlotte, NC 28201-1319Date(s) debt was incurred 6/1/2019 0:00Last 4 digits of account number 9375As of the petition filing date, the claim is: *Check all that apply.***\$794.65**

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

Debtor **Affiniti PA, LLC**
Name

Case number (if known)

3.90	Nonpriority creditor's name and mailing address Century Link 2419 PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>7/2/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28.53
3.91	Nonpriority creditor's name and mailing address Century Link 2654 PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,045.42
3.92	Nonpriority creditor's name and mailing address Century Link 2654 PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,082.96
3.93	Nonpriority creditor's name and mailing address Century Link 2654 PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,071.43
3.94	Nonpriority creditor's name and mailing address Century Link 2654 PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,046.42
3.95	Nonpriority creditor's name and mailing address Century Link 7395 PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,070.15
3.96	Nonpriority creditor's name and mailing address Century Link 7395 PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>6/16/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,068.41

3.97	Nonpriority creditor's name and mailing address Century Link-1915-PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>4/13/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,510.50
3.98	Nonpriority creditor's name and mailing address Century Link-1915-PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,510.50
3.99	Nonpriority creditor's name and mailing address Century Link-1915-PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,510.50
3.100	Nonpriority creditor's name and mailing address Century Link-9375-PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>4/3/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,752.06
3.101	Nonpriority creditor's name and mailing address Century Link-9375-PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>5/7/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,698.95
3.102	Nonpriority creditor's name and mailing address Century Link-9375-PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,758.24
3.103	Nonpriority creditor's name and mailing address Century Link-9375-PA P.O. Box 1319 Charlotte, NC 28201-1319 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>9375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,759.01

3.104	Nonpriority creditor's name and mailing address Clearfield County 911 - PA 911 Leonard St. Clearfield, PA 16801 Date(s) debt was incurred <u>12/1/2017 0:00</u> Last 4 digits of account number <u>Affiniti PA LLC</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,128.91
3.105	Nonpriority creditor's name and mailing address Clearfield County 911 - PA 911 Leonard St. Clearfield, PA 16801 Date(s) debt was incurred <u>4/1/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA LLC</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,128.91
3.106	Nonpriority creditor's name and mailing address Clearfield County 911 - PA 911 Leonard St. Clearfield, PA 16801 Date(s) debt was incurred <u>5/1/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA LLC</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,128.91
3.107	Nonpriority creditor's name and mailing address Clearfield County 911 - PA 911 Leonard St. Clearfield, PA 16801 Date(s) debt was incurred <u>6/1/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA LLC</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,128.91
3.108	Nonpriority creditor's name and mailing address Clearfield County 911 - PA 911 Leonard St. Clearfield, PA 16801 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA LLC</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,128.91
3.109	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>9/30/2018 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$255.20
3.110	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>10/1/2018 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,080.00

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3.111	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>10/1/2018 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,872.48
3.112	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,914.48
3.113	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,121.25
3.114	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,956.48
3.115	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,162.50
3.116	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,043.97
3.117	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,998.48

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3.118	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>2/15/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,040.48
3.119	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>2/15/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,858.05
3.120	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,800.00
3.121	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,899.30
3.122	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,800.00
3.123	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,186.64
3.124	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,227.89

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3.125	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,825.50
3.126	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,269.14
3.127	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,867.50
3.128	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$482.72
3.129	Nonpriority creditor's name and mailing address Cogent Communications P.O. Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$482.72
3.130	Nonpriority creditor's name and mailing address Comcast (4326) - PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>1/15/2018 0:00</u> Last 4 digits of account number <u>4326</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$812.90
3.131	Nonpriority creditor's name and mailing address Comcast (9840) - PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>2/15/2019 0:00</u> Last 4 digits of account number <u>9840</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,810.99

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3.132	Nonpriority creditor's name and mailing address Comcast (9840) - PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>3/15/2019 0:00</u> Last 4 digits of account number <u>9840</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,223.06
3.133	Nonpriority creditor's name and mailing address Comcast (9840) - PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>4/15/2019 0:00</u> Last 4 digits of account number <u>9840</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,323.11
3.134	Nonpriority creditor's name and mailing address Comcast (9840) - PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>5/15/2019 0:00</u> Last 4 digits of account number <u>9840</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,431.46
3.135	Nonpriority creditor's name and mailing address Comcast (9840) - PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>6/15/2019 0:00</u> Last 4 digits of account number <u>9840</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,400.13
3.136	Nonpriority creditor's name and mailing address Comcast (9840) - PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>6/30/2019 0:00</u> Last 4 digits of account number <u>9840</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,804.33
3.137	Nonpriority creditor's name and mailing address COMCAST 1840-PA P.O. Box 3001 Southeastern, PA 19398-3001 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>8</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$97.92
3.138	Nonpriority creditor's name and mailing address Comcast-0163-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>11/15/2018 0:00</u> Last 4 digits of account number <u>0163</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,081.63

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3.139	Nonpriority creditor's name and mailing address Comcast-0163-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>1/15/2019 0:00</u> Last 4 digits of account number <u>0163</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,033.07
3.140	Nonpriority creditor's name and mailing address Comcast-0163-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>2/15/2019 0:00</u> Last 4 digits of account number <u>0163</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,092.79
3.141	Nonpriority creditor's name and mailing address Comcast-0163-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>3/15/2019 0:00</u> Last 4 digits of account number <u>0163</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,045.74
3.142	Nonpriority creditor's name and mailing address Comcast-0163-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>4/15/2019 0:00</u> Last 4 digits of account number <u>0163</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,058.04
3.143	Nonpriority creditor's name and mailing address Comcast-0163-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>5/15/2019 0:00</u> Last 4 digits of account number <u>0163</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,238.73
3.144	Nonpriority creditor's name and mailing address Comcast-0163-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>6/15/2019 0:00</u> Last 4 digits of account number <u>0163</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,449.60
3.145	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>8/1/2017 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,329.40

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3.146	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>9/1/2017 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,222.26
3.147	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>10/1/2017 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,322.36
3.148	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>11/1/2017 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,355.69
3.149	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>12/1/2017 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,390.53
3.150	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>2/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,476.72
3.151	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>3/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,510.81
3.152	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>4/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,526.92

3.153	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>5/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,564.58
3.154	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>6/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,602.49
3.155	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,631.80
3.156	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>8/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,683.29
3.157	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>9/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,722.77
3.158	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>10/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,782.61
3.159	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,823.45

Name

3.160	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,780.47
3.161	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,206.16
3.162	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,307.85
3.163	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,385.96
3.164	Nonpriority creditor's name and mailing address COMCAST8952-PA P.O. Box 37601 Philadelphia, PA 19101-0601 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>8952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,418.70
3.165	Nonpriority creditor's name and mailing address COUNTY OF CLARION-tower 330 Main Street Room 217 Clarion, PA 16214 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>2106</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.166	Nonpriority creditor's name and mailing address Crown Castle Fiber P.O. Box 21772 New York, NY 10087-1772 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>8966</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,750.00

3.167	Nonpriority creditor's name and mailing address Crown Communications -116577 - PA 2000 Corporate Drive Canonsburg, PA 15317 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>6577</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,895.73
3.168	Nonpriority creditor's name and mailing address Crown Communications -116577 - PA 2000 Corporate Drive Canonsburg, PA 15317 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>6577</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,244.75
3.169	Nonpriority creditor's name and mailing address Crown Communications -116577 - PA 2000 Corporate Drive Canonsburg, PA 15317 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>6577</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,037.28
3.170	Nonpriority creditor's name and mailing address Crown Communications -116577 - PA 2000 Corporate Drive Canonsburg, PA 15317 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>6577</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,246.24
3.171	Nonpriority creditor's name and mailing address Crown Communications -116577 - PA 2000 Corporate Drive Canonsburg, PA 15317 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>6577</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,982.61
3.172	Nonpriority creditor's name and mailing address Diamond Communication - PA 820 Morris Turnpike Suite 104 Short Hills, NJ 07078 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>0101,3401</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,326.21
3.173	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>2/1/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00

Name

3.174	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>3/1/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.175	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>4/1/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.176	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>5/1/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.177	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>6/1/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.178	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.179	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>8/1/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.180	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>9/1/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00

Debtor **Affiniti PA, LLC**
Name

Case number (if known)

3.181	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>10/1/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.182	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>11/30/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.183	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>12/31/2018 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.184	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.185	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.186	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.187	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00

Name

3.188	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.189	Nonpriority creditor's name and mailing address Diocese of Altoona-Johnstown 927 South Logan Blvd. Hollidaysburg, PA 16648 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>Affinit PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.190	Nonpriority creditor's name and mailing address DQE Communications P.O. Box 535378 Pittsburgh, PA 15253-5378 Date(s) debt was incurred <u>6/24/2019 0:00</u> Last 4 digits of account number <u>1206</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,325.00
3.191	Nonpriority creditor's name and mailing address DQE Communications P.O. Box 535378 Pittsburgh, PA 15253-5378 Date(s) debt was incurred <u>7/15/2019 0:00</u> Last 4 digits of account number <u>1206</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.192	Nonpriority creditor's name and mailing address EMF Broadcasting (dba KLOVE AiR1) P.O. Box 1685 Rocklin, CA 95677 Date(s) debt was incurred <u>11/30/2018 0:00</u> Last 4 digits of account number <u>2767</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,400.00
3.193	Nonpriority creditor's name and mailing address EMF Broadcasting (dba KLOVE AiR1) P.O. Box 1685 Rocklin, CA 95677 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>2767</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,400.00
3.194	Nonpriority creditor's name and mailing address EMF Broadcasting (dba KLOVE AiR1) P.O. Box 1685 Rocklin, CA 95677 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>2767</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,400.00

Name

3.195	Nonpriority creditor's name and mailing address EMF Broadcasting (dba KLOVE AiR1) P.O. Box 1685 Rocklin, CA 95677 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>2767</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,400.00</u>
3.196	Nonpriority creditor's name and mailing address EMF Broadcasting (dba KLOVE AiR1) P.O. Box 1685 Rocklin, CA 95677 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>2767</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,400.00</u>
3.197	Nonpriority creditor's name and mailing address EMF Broadcasting (dba KLOVE AiR1) P.O. Box 1685 Rocklin, CA 95677 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>2767</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,400.00</u>
3.198	Nonpriority creditor's name and mailing address EMF Broadcasting (dba KLOVE AiR1) P.O. Box 1685 Rocklin, CA 95677 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>2767</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,400.00</u>
3.199	Nonpriority creditor's name and mailing address EMF Broadcasting (dba KLOVE AiR1) P.O. Box 1685 Rocklin, CA 95677 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>2767</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,400.00</u>
3.200	Nonpriority creditor's name and mailing address Ephrata Area Repeater Society - PA P.O. Box 674 Ephrata, PA 17522 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$450.00</u>
3.201	Nonpriority creditor's name and mailing address Equinix Services, Inc. - PA 4252 Solutions Center Chicago, IL 60677-4002 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>0135</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,857.95</u>

Debtor **Affiniti PA, LLC**
Name

Case number (if known)

3.202	Nonpriority creditor's name and mailing address Equinix Services, Inc. - PA 4252 Solutions Center Chicago, IL 60677-4002 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>0135</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,857.95
3.203	Nonpriority creditor's name and mailing address GTP Towers Issuer LLC- Clarion - PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>11/30/2018 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,494.20
3.204	Nonpriority creditor's name and mailing address GTP Towers Issuer LLC- Clarion - PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,494.20
3.205	Nonpriority creditor's name and mailing address GTP Towers Issuer LLC- Clarion - PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,494.20
3.206	Nonpriority creditor's name and mailing address GTP Towers Issuer LLC- Clarion - PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,494.20
3.207	Nonpriority creditor's name and mailing address GTP Towers Issuer LLC- Clarion - PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,494.20
3.208	Nonpriority creditor's name and mailing address GTP Towers Issuer LLC- Clarion - PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,494.20

Name

3.209	Nonpriority creditor's name and mailing address GTP Towers Issuer LLC- Clarion - PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,593.97
3.210	Nonpriority creditor's name and mailing address GTP Towers Issuer LLC- Clarion - PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,593.97
3.211	Nonpriority creditor's name and mailing address GTP-Warfordsburg-PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>11/30/2018 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,052.64
3.212	Nonpriority creditor's name and mailing address GTP-Warfordsburg-PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,052.64
3.213	Nonpriority creditor's name and mailing address GTP-Warfordsburg-PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,052.64
3.214	Nonpriority creditor's name and mailing address GTP-Warfordsburg-PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,052.64
3.215	Nonpriority creditor's name and mailing address GTP-Warfordsburg-PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,052.64

Name

3.216	Nonpriority creditor's name and mailing address GTP-Warfordsburg-PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,052.64
3.217	Nonpriority creditor's name and mailing address GTP-Warfordsburg-PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,052.64
3.218	Nonpriority creditor's name and mailing address GTP-Warfordsburg-PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,134.75
3.219	Nonpriority creditor's name and mailing address GTP-Warfordsburg-PA Dept 3328 Carol Stream, IL 60132-3328 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>3172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,134.75
3.220	Nonpriority creditor's name and mailing address GTT COMMUNICATIONS INC 7900 Tysons One Place Suite 1450 McClean, VA 22102 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>MN01</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,656.46
3.221	Nonpriority creditor's name and mailing address GTT COMMUNICATIONS INC 7900 Tysons One Place Suite 1450 McClean, VA 22102 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>MN01</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,656.46
3.222	Nonpriority creditor's name and mailing address GTT COMMUNICATIONS INC 7900 Tysons One Place Suite 1450 McClean, VA 22102 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>MN01</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,372.54

Name

3.223	Nonpriority creditor's name and mailing address GVNW/PA UNIVERSAL SERVICE FUND 1695 State ST. Fulton Bank East Petersburg, PA 17520 Date(s) debt was incurred <u>9/11/2019</u> Last 4 digits of account number <u>5896</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,477.04 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.224	Nonpriority creditor's name and mailing address GVNW/PA Universal Service Fund GVNW Consulting, Inc. PA USF Administrator 3220 Pleasant Run, Suite A Springfield, IL 62711 Date(s) debt was incurred <u>09/11/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,477.04 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.225	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$850.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.226	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>8/1/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$850.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.227	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>9/1/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$850.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.228	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>10/1/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$850.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.229	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>11/30/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$850.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Affiniti PA, LLC**
Name

Case number (if known)

3.230	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>12/31/2018 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00
3.231	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00
3.232	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00
3.233	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00
3.234	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00
3.235	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00
3.236	Nonpriority creditor's name and mailing address Handsome Brothers Inc - PA 2513 6th Avenue Altoona, PA 16602 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00

3.237 Nonpriority creditor's name and mailing address **Hilltop Tower Leasing Inc. - PA**
400 Highland Ave.
Altoona, PA 16602
 Date(s) debt was incurred 6/1/2019 0:00
 Last 4 digits of account number RK01
 As of the petition filing date, the claim is: *Check all that apply.* **\$145.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.238 Nonpriority creditor's name and mailing address **Indiana County - PA**
801 Water Street
Indiana County Development Corp
Indiana, PA 15701-1705
 Date(s) debt was incurred 11/30/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$250.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.239 Nonpriority creditor's name and mailing address **Indiana County - PA**
801 Water Street
Indiana County Development Corp
Indiana, PA 15701-1705
 Date(s) debt was incurred 12/31/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$250.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.240 Nonpriority creditor's name and mailing address **Indiana County - PA**
801 Water Street
Indiana County Development Corp
Indiana, PA 15701-1705
 Date(s) debt was incurred 1/1/2019 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$250.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.241 Nonpriority creditor's name and mailing address **Indiana County - PA**
801 Water Street
Indiana County Development Corp
Indiana, PA 15701-1705
 Date(s) debt was incurred 2/1/2019 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$250.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.242 Nonpriority creditor's name and mailing address **Indiana County - PA**
801 Water Street
Indiana County Development Corp
Indiana, PA 15701-1705
 Date(s) debt was incurred 3/1/2019 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$250.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.243 Nonpriority creditor's name and mailing address **Indiana County - PA**
801 Water Street
Indiana County Development Corp
Indiana, PA 15701-1705
 Date(s) debt was incurred 4/1/2019 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$250.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.244	Nonpriority creditor's name and mailing address Indiana County - PA 801 Water Street Indiana County Development Corp Indiana, PA 15701-1705 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.245	Nonpriority creditor's name and mailing address Indiana County - PA 801 Water Street Indiana County Development Corp Indiana, PA 15701-1705 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.246	Nonpriority creditor's name and mailing address Level 3 Communication 1-8Y2NS - PA P.O. Box 910182 Denver, CO 80291-0182 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>2NVS</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,316.42
3.247	Nonpriority creditor's name and mailing address Level 3 Communication 1-8Y2NS - PA P.O. Box 910182 Denver, CO 80291-0182 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>2NVS</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,277.57
3.248	Nonpriority creditor's name and mailing address Level 3 Communication 1-8Y2NS - PA P.O. Box 910182 Denver, CO 80291-0182 Date(s) debt was incurred <u>6/30/2019 0:00</u> Last 4 digits of account number <u>2NVS</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49.17
3.249	Nonpriority creditor's name and mailing address Level 3 Communication 13GV1076 - PA P.O. Box 910182 Denver, CO 80291-0182 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>1076</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,261.36
3.250	Nonpriority creditor's name and mailing address Level 3 Communication 13GV1076 - PA P.O. Box 910182 Denver, CO 80291-0182 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>1076</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,261.36

3.251	Nonpriority creditor's name and mailing address Level 3 Communication 13GV1076 - PA P.O. Box 910182 Denver, CO 80291-0182 Date(s) debt was incurred <u>6/30/2019 0:00</u> Last 4 digits of account number <u>1076</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33.92
3.252	Nonpriority creditor's name and mailing address Level 3- 039523-PA P.O. Box 931843 Atlanta, GA 31193-1843 Date(s) debt was incurred <u>5/20/2019 0:00</u> Last 4 digits of account number <u>9520</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,245.40
3.253	Nonpriority creditor's name and mailing address Level 3- 039523-PA P.O. Box 931843 Atlanta, GA 31193-1843 Date(s) debt was incurred <u>6/20/2019 0:00</u> Last 4 digits of account number <u>9520</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,250.77
3.254	Nonpriority creditor's name and mailing address Mount Collins Cemetery Association - PA U.S. 62 Tionesta, PA 16353 Date(s) debt was incurred <u>11/30/2018 0:00</u> Last 4 digits of account number <u>Last Mile</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.255	Nonpriority creditor's name and mailing address Mount Collins Cemetery Association - PA U.S. 62 Tionesta, PA 16353 Date(s) debt was incurred <u>12/31/2018 0:00</u> Last 4 digits of account number <u>Last Mile</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.256	Nonpriority creditor's name and mailing address Mount Collins Cemetery Association - PA U.S. 62 Tionesta, PA 16353 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>Last Mile</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.257	Nonpriority creditor's name and mailing address Mount Collins Cemetery Association - PA U.S. 62 Tionesta, PA 16353 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>Last Mile</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00

3.258	Nonpriority creditor's name and mailing address Mount Collins Cemetery Association - PA U.S. 62 Tionesta, PA 16353 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>Last Mile</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
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3.259	Nonpriority creditor's name and mailing address Mount Collins Cemetery Association - PA U.S. 62 Tionesta, PA 16353 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>Last Mile</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
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3.260	Nonpriority creditor's name and mailing address Mount Collins Cemetery Association - PA U.S. 62 Tionesta, PA 16353 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>Last Mile</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
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3.261	Nonpriority creditor's name and mailing address Mount Collins Cemetery Association - PA U.S. 62 Tionesta, PA 16353 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>Last Mile</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
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3.262	Nonpriority creditor's name and mailing address Nittany Media, Inc. - PA 18 N. Juniata ST. Lewistown, PA 17044 Date(s) debt was incurred <u>12/31/2018 0:00</u> Last 4 digits of account number <u>Affiniti</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00
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3.263	Nonpriority creditor's name and mailing address Nittany Media, Inc. - PA 18 N. Juniata ST. Lewistown, PA 17044 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00
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3.264	Nonpriority creditor's name and mailing address Nittany Media, Inc. - PA 18 N. Juniata ST. Lewistown, PA 17044 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>Affiniti</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00
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3.265 Nonpriority creditor's name and mailing address **Nittany Media, Inc. - PA**
18 N. Juniata ST.
Lewistown, PA 17044
 Date(s) debt was incurred 3/1/2019 0:00
 Last 4 digits of account number Affiniti
 As of the petition filing date, the claim is: *Check all that apply.* **\$900.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.266 Nonpriority creditor's name and mailing address **Nittany Media, Inc. - PA**
18 N. Juniata ST.
Lewistown, PA 17044
 Date(s) debt was incurred 4/1/2019 0:00
 Last 4 digits of account number Affiniti
 As of the petition filing date, the claim is: *Check all that apply.* **\$900.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.267 Nonpriority creditor's name and mailing address **Nittany Media, Inc. - PA**
18 N. Juniata ST.
Lewistown, PA 17044
 Date(s) debt was incurred 5/1/2019 0:00
 Last 4 digits of account number Affiniti
 As of the petition filing date, the claim is: *Check all that apply.* **\$900.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.268 Nonpriority creditor's name and mailing address **Nittany Media, Inc. - PA**
18 N. Juniata ST.
Lewistown, PA 17044
 Date(s) debt was incurred 6/1/2019 0:00
 Last 4 digits of account number Affiniti
 As of the petition filing date, the claim is: *Check all that apply.* **\$900.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.269 Nonpriority creditor's name and mailing address **Northeast Tower Rental LLC - PA**
4271 Mucy-Exchange Road
Turbotville, PA 17772
 Date(s) debt was incurred 7/16/2018 0:00
 Last 4 digits of account number Affiniti
 As of the petition filing date, the claim is: *Check all that apply.* **\$247.91**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.270 Nonpriority creditor's name and mailing address **Northeast Tower Rental LLC - PA**
4271 Mucy-Exchange Road
Turbotville, PA 17772
 Date(s) debt was incurred 8/17/2018 0:00
 Last 4 digits of account number Affiniti
 As of the petition filing date, the claim is: *Check all that apply.* **\$247.91**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.271 Nonpriority creditor's name and mailing address **Northeast Tower Rental LLC - PA**
4271 Mucy-Exchange Road
Turbotville, PA 17772
 Date(s) debt was incurred 9/1/2018 0:00
 Last 4 digits of account number Affiniti
 As of the petition filing date, the claim is: *Check all that apply.* **\$247.91**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

Name

3.272	Nonpriority creditor's name and mailing address Northeast Tower Rental LLC - PA 4271 Mucy-Exchange Road Turbotville, PA 17772 Date(s) debt was incurred <u>10/31/2018 0:00</u> Last 4 digits of account number <u>Affiniti</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$247.91
3.273	Nonpriority creditor's name and mailing address Northeast Tower Rental LLC - PA 4271 Mucy-Exchange Road Turbotville, PA 17772 Date(s) debt was incurred <u>11/30/2018 0:00</u> Last 4 digits of account number <u>Affiniti</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$247.91
3.274	Nonpriority creditor's name and mailing address Northeast Tower Rental LLC - PA 4271 Mucy-Exchange Road Turbotville, PA 17772 Date(s) debt was incurred <u>12/17/2018 0:00</u> Last 4 digits of account number <u>Affiniti</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$247.91
3.275	Nonpriority creditor's name and mailing address PA Game Commission P.O. Box 2833 Harrisburg, PA 17105 Date(s) debt was incurred <u>1/31/2019 0:00</u> Last 4 digits of account number <u>0947</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15.28
3.276	Nonpriority creditor's name and mailing address PA Game Commission P.O. Box 2833 Harrisburg, PA 17105 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>0947</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,600.00
3.277	Nonpriority creditor's name and mailing address Pennsylvania One Call P.O. Box 640407 Pittsburgh, PA 15264-0407 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>LMI</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30.52
3.278	Nonpriority creditor's name and mailing address Pennsylvania One Call P.O. Box 640407 Pittsburgh, PA 15264-0407 Date(s) debt was incurred <u>6/30/2019 0:00</u> Last 4 digits of account number <u>LMI</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$69.24

Name

3.279	Nonpriority creditor's name and mailing address Pennsylvania One Call P.O. Box 640407 Pittsburgh, PA 15264-0407 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>LMI</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2.18
3.280	Nonpriority creditor's name and mailing address Pennsylvania Public Utility Comm 400 North Street Suite 3 Harrisburg, PA 17120 Date(s) debt was incurred <u>09/09/2019</u> Last 4 digits of account number <u>5896</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,048.00
3.281	Nonpriority creditor's name and mailing address PenTeleData - PA P.O. Box 401 ATTN: Payment Processing Center Palmerton, PA Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>0278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$94.84
3.282	Nonpriority creditor's name and mailing address PenTeleData - PA P.O. Box 401 ATTN: Payment Processing Center Palmerton, PA Date(s) debt was incurred <u>4/10/2019 0:00</u> Last 4 digits of account number <u>0278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,090.95
3.283	Nonpriority creditor's name and mailing address PenTeleData - PA P.O. Box 401 ATTN: Payment Processing Center Palmerton, PA Date(s) debt was incurred <u>5/10/2019 0:00</u> Last 4 digits of account number <u>0278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,137.77
3.284	Nonpriority creditor's name and mailing address PenTeleData - PA P.O. Box 401 ATTN: Payment Processing Center Palmerton, PA Date(s) debt was incurred <u>6/10/2019 0:00</u> Last 4 digits of account number <u>0278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,183.89
3.285	Nonpriority creditor's name and mailing address Presidio Networked Solutions P.O. Box 822169 Philadelphia, PA 19182-2169 Date(s) debt was incurred <u>6/3/2019 0:00</u> Last 4 digits of account number <u>N015</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,547.00

Name

3.286	Nonpriority creditor's name and mailing address REA Energy Coop Inc-7031-PA P.O. Box 70 Indiana, PA 15701-0070 Date(s) debt was incurred <u>6/14/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70.02
3.287	Nonpriority creditor's name and mailing address REA Energy Coop Inc-7031-PA P.O. Box 70 Indiana, PA 15701-0070 Date(s) debt was incurred <u>7/8/2019 0:00</u> Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$68.48
3.288	Nonpriority creditor's name and mailing address SBA Properties, LLC-06297- PA P.O. Box 101667 Atlanta, GA 30392-1667 Date(s) debt was incurred <u>1/1/2018 0:00</u> Last 4 digits of account number <u>7S02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,689.97
3.289	Nonpriority creditor's name and mailing address SBA Properties, LLC-06297- PA P.O. Box 101667 Atlanta, GA 30392-1667 Date(s) debt was incurred <u>2/1/2018 0:00</u> Last 4 digits of account number <u>7S02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,689.97
3.290	Nonpriority creditor's name and mailing address SBA Properties, LLC-06297- PA P.O. Box 101667 Atlanta, GA 30392-1667 Date(s) debt was incurred <u>3/1/2018 0:00</u> Last 4 digits of account number <u>7S02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,689.97
3.291	Nonpriority creditor's name and mailing address SBA Properties, LLC-06297- PA P.O. Box 101667 Atlanta, GA 30392-1667 Date(s) debt was incurred <u>4/1/2018 0:00</u> Last 4 digits of account number <u>7S02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,689.97
3.292	Nonpriority creditor's name and mailing address SBA Properties, LLC-06297- PA P.O. Box 101667 Atlanta, GA 30392-1667 Date(s) debt was incurred <u>5/1/2018 0:00</u> Last 4 digits of account number <u>7S02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,689.97

Name

3.293	Nonpriority creditor's name and mailing address SBA Properties, LLC-06297- PA P.O. Box 101667 Atlanta, GA 30392-1667 Date(s) debt was incurred <u>6/1/2018 0:00</u> Last 4 digits of account number <u>7S02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,689.97</u>
3.294	Nonpriority creditor's name and mailing address SBA Properties, LLC-06297- PA P.O. Box 101667 Atlanta, GA 30392-1667 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>7S02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,689.97</u>
3.295	Nonpriority creditor's name and mailing address SBA Properties, LLC-06297- PA P.O. Box 101667 Atlanta, GA 30392-1667 Date(s) debt was incurred <u>8/1/2018 0:00</u> Last 4 digits of account number <u>7S02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$493.80</u>
3.296	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>12/1/2017 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,153.00</u>
3.297	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>1/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,153.00</u>
3.298	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>2/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,153.00</u>
3.299	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>3/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,153.00</u>

	Debtor Affiniti PA, LLC Name	Case number (if known) _____
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3.300	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>4/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,200.29 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.301	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>5/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,223.94 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.302	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>6/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,223.94 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.303	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,896.55 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.304	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>8/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,633.43 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.305	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,435.58 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.306	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,079.70 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.307	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,301.16
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3.308	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,065.85
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3.309	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,301.16
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3.310	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,065.85
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3.311	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,079.70
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3.312	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,435.58
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3.313	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,065.85
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Debtor **Affiniti PA, LLC**
Name

Case number (if known)

3.314	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,435.58
3.315	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,301.16
3.316	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,079.70
3.317	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,065.85
3.318	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,508.65
3.319	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,301.16
3.320	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,079.70

3.321	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,065.85
3.322	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,508.65
3.323	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,301.16
3.324	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,079.70
3.325	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,508.65
3.326	Nonpriority creditor's name and mailing address SBA Towers II-Mult-PA P.O. Box 933730 Atlanta, GA 31193-3730 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>7A04,7A15,PA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,112.09
3.327	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>2/1/2018 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$940.71

Debtor **Affiniti PA, LLC**
Name

Case number (if known)

3.328	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>3/1/2018 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$940.71
3.329	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>4/1/2018 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$940.71
3.330	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>5/1/2018 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$940.71
3.331	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>6/1/2018 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$940.71
3.332	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$940.71
3.333	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>8/1/2018 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$987.75
3.334	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$987.75

Name

3.335	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$987.75
3.336	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$987.75
3.337	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$987.75
3.338	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$987.75
3.339	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$987.75
3.340	Nonpriority creditor's name and mailing address SBA Towers, LLC-02561- PA P.O. Box 945752 Atlanta, GA 30394-5752 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>1B02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$987.75
3.341	Nonpriority creditor's name and mailing address Somerset Rural Electric - PA 223 Industrial Park Rd. Somerset, PA 15501-3406 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>4801</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48.32

3.342 Nonpriority creditor's name and mailing address **Somerset Rural Electric - PA**
223 Industrial Park Rd.
Somerset, PA 15501-3406
 Date(s) debt was incurred 6/28/2019 0:00
 Last 4 digits of account number 4801
 As of the petition filing date, the claim is: *Check all that apply.* **\$50.40**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.343 Nonpriority creditor's name and mailing address **Subcarrier Communications, Inc. - PA**
139 White Oak Lane
Old Bridge, NJ 08857
 Date(s) debt was incurred 3/1/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$600.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.344 Nonpriority creditor's name and mailing address **Subcarrier Communications, Inc. - PA**
139 White Oak Lane
Old Bridge, NJ 08857
 Date(s) debt was incurred 4/1/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$600.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.345 Nonpriority creditor's name and mailing address **Subcarrier Communications, Inc. - PA**
139 White Oak Lane
Old Bridge, NJ 08857
 Date(s) debt was incurred 5/1/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$600.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.346 Nonpriority creditor's name and mailing address **Subcarrier Communications, Inc. - PA**
139 White Oak Lane
Old Bridge, NJ 08857
 Date(s) debt was incurred 6/1/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$600.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.347 Nonpriority creditor's name and mailing address **Subcarrier Communications, Inc. - PA**
139 White Oak Lane
Old Bridge, NJ 08857
 Date(s) debt was incurred 7/1/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$600.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.348 Nonpriority creditor's name and mailing address **Subcarrier Communications, Inc. - PA**
139 White Oak Lane
Old Bridge, NJ 08857
 Date(s) debt was incurred 8/1/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$600.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.349 Nonpriority creditor's name and mailing address **Subcarrier Communications, Inc. - PA**
139 White Oak Lane
Old Bridge, NJ 08857
 Date(s) debt was incurred 9/1/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$600.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.350 Nonpriority creditor's name and mailing address **Subcarrier Communications, Inc. - PA**
139 White Oak Lane
Old Bridge, NJ 08857
 Date(s) debt was incurred 10/1/2018 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$600.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.351 Nonpriority creditor's name and mailing address **T-WARNR9201-PA**
P.O. Box 901
Carol Stream, IL 60132-0901
 Date(s) debt was incurred 2/23/2019 0:00
 Last 4 digits of account number 4001
 As of the petition filing date, the claim is: *Check all that apply.* **\$132.32**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.352 Nonpriority creditor's name and mailing address **Tessco - PA**
P.O. Box 102885
Atlanta, GA 30368-2885
 Date(s) debt was incurred 7/19/2017 0:00
 Last 4 digits of account number 4318
 As of the petition filing date, the claim is: *Check all that apply.* **\$8,099.82**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.353 Nonpriority creditor's name and mailing address **Thomas McClintock - PA**
104 Samuels Road
Somerset, PA 15501
 Date(s) debt was incurred 6/1/2019 0:00
 Last 4 digits of account number Affiniti PA
 As of the petition filing date, the claim is: *Check all that apply.* **\$400.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.354 Nonpriority creditor's name and mailing address **Time Warner - Endless Mountain (5501) -**
P.O. Box 223085
Pittsburgh, PA 15251-2085
 Date(s) debt was incurred 3/1/2019 0:00
 Last 4 digits of account number 5501
 As of the petition filing date, the claim is: *Check all that apply.* **\$2,631.26**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

3.355 Nonpriority creditor's name and mailing address **Time Warner - Endless Mountain (5501) -**
P.O. Box 223085
Pittsburgh, PA 15251-2085
 Date(s) debt was incurred 4/9/2019 0:00
 Last 4 digits of account number 5501
 As of the petition filing date, the claim is: *Check all that apply.* **\$2,631.26**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: _____
 Is the claim subject to offset? ☒ No ☐ Yes

Debtor **Affiniti PA, LLC**
Name

Case number (if known)

3.356	Nonpriority creditor's name and mailing address Time Warner - Endless Mountain (5501) - P.O. Box 223085 Pittsburgh, PA 15251-2085 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>5501</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,631.26
3.357	Nonpriority creditor's name and mailing address Time Warner - Endless Mountain (5501) - P.O. Box 223085 Pittsburgh, PA 15251-2085 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>5501</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,631.26
3.358	Nonpriority creditor's name and mailing address Time Warner - Endless Mountain (5501) - P.O. Box 223085 Pittsburgh, PA 15251-2085 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>5501</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,631.26
3.359	Nonpriority creditor's name and mailing address Time Warner - Erie (8801) - PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>10/31/2018 0:00</u> Last 4 digits of account number <u>1001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$798.32
3.360	Nonpriority creditor's name and mailing address Time Warner Cable (60S Greenville)-9802 P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>2/23/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.98
3.361	Nonpriority creditor's name and mailing address Time Warner Cable (60S Greenville)-9802 P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>3/23/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$963.43
3.362	Nonpriority creditor's name and mailing address Time Warner Cable (60S Greenville)-9802 P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>4/23/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$953.56

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3.363	Nonpriority creditor's name and mailing address Time Warner Cable (60S Greenville)-9802 P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>5/23/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,016.16
3.364	Nonpriority creditor's name and mailing address Time Warner Cable (60S Greenville)-9802 P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>6/6/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$979.79
3.365	Nonpriority creditor's name and mailing address Time Warner Cable - (3591 Sharon Rd) - (P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>12/24/2018 0:00</u> Last 4 digits of account number <u>7001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00
3.366	Nonpriority creditor's name and mailing address Time Warner Cable - (3591 Sharon Rd) - (P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>1/24/2019 0:00</u> Last 4 digits of account number <u>7001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$154.42
3.367	Nonpriority creditor's name and mailing address Time Warner Cable - (3591 Sharon Rd) - (P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>2/23/2019 0:00</u> Last 4 digits of account number <u>7001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$875.69
3.368	Nonpriority creditor's name and mailing address Time Warner Cable - (3591 Sharon Rd) - (P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>3/23/2019 0:00</u> Last 4 digits of account number <u>7001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$888.83
3.369	Nonpriority creditor's name and mailing address Time Warner Cable - (3591 Sharon Rd) - (P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>4/27/2019 0:00</u> Last 4 digits of account number <u>7001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$902.16

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3.370	Nonpriority creditor's name and mailing address Time Warner Cable - (3591 Sharon Rd) - (P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>5/24/2019 0:00</u> Last 4 digits of account number <u>7001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$915.69
3.371	Nonpriority creditor's name and mailing address Time Warner Cable - (425 S Good Hope) - P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>11/25/2018 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.12
3.372	Nonpriority creditor's name and mailing address Time Warner Cable - (425 S Good Hope) - P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>12/25/2018 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$863.14
3.373	Nonpriority creditor's name and mailing address Time Warner Cable - (425 S Good Hope) - P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>1/25/2019 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$876.09
3.374	Nonpriority creditor's name and mailing address Time Warner Cable - (425 S Good Hope) - P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$876.09
3.375	Nonpriority creditor's name and mailing address Time Warner Cable - 2901- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>12/2/2018 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$876.10
3.376	Nonpriority creditor's name and mailing address Time Warner Cable - 2901- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$889.24

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3.377	Nonpriority creditor's name and mailing address Time Warner Cable - 2901- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>2/2/2019 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$876.48
3.378	Nonpriority creditor's name and mailing address Time Warner Cable - 2901- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>3/2/2019 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$889.63
3.379	Nonpriority creditor's name and mailing address Time Warner Cable - 2901- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>4/9/2019 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$902.97
3.380	Nonpriority creditor's name and mailing address Time Warner Cable - 2901- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$916.52
3.381	Nonpriority creditor's name and mailing address Time Warner Cable - 2901- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>6/2/2019 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$930.26
3.382	Nonpriority creditor's name and mailing address Time Warner Cable - 2901- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>6/13/2019 0:00</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,097.36
3.383	Nonpriority creditor's name and mailing address Time Warner Cable 8801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>1/11/2019 0:00</u> Last 4 digits of account number <u>1001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$545.53

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3.384	Nonpriority creditor's name and mailing address Time Warner Cable 8801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>2/11/2019 0:00</u> Last 4 digits of account number <u>1001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$667.72
3.385	Nonpriority creditor's name and mailing address Time Warner Cable 8801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>3/10/2019 0:00</u> Last 4 digits of account number <u>1001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$677.73
3.386	Nonpriority creditor's name and mailing address Time Warner Cable 8801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>4/11/2019 0:00</u> Last 4 digits of account number <u>1001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$887.90
3.387	Nonpriority creditor's name and mailing address Time Warner Cable 8801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>1001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$698.22
3.388	Nonpriority creditor's name and mailing address Time Warner Cable-1701-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>1/13/2019 0:00</u> Last 4 digits of account number <u>9001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$953.74
3.389	Nonpriority creditor's name and mailing address Time Warner Cable-6801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>12/2/2018 0:00</u> Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$877.52
3.390	Nonpriority creditor's name and mailing address Time Warner Cable-6801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>1/2/2019 0:00</u> Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$889.28

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3.391	Nonpriority creditor's name and mailing address Time Warner Cable-6801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>2/2/2019 0:00</u> Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$876.50
3.392	Nonpriority creditor's name and mailing address Time Warner Cable-6801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>3/2/2019 0:00</u> Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$889.65
3.393	Nonpriority creditor's name and mailing address Time Warner Cable-6801-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>4/9/2019 0:00</u> Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$902.99
3.394	Nonpriority creditor's name and mailing address Time Warner-7101-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>11/13/2018 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$876.08
3.395	Nonpriority creditor's name and mailing address Time Warner-7101-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>12/13/2018 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$876.09
3.396	Nonpriority creditor's name and mailing address Time Warner-7101-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>1/13/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$889.23
3.397	Nonpriority creditor's name and mailing address Time Warner-7101-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>2/13/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$889.62

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3.398	Nonpriority creditor's name and mailing address Time Warner-7101-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>3/13/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$902.97
3.399	Nonpriority creditor's name and mailing address Time Warner-7101-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>4/13/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$916.51
3.400	Nonpriority creditor's name and mailing address Time Warner-7101-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$930.26
3.401	Nonpriority creditor's name and mailing address Time Warner-7101-PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>6/13/2019 0:00</u> Last 4 digits of account number <u>3001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$944.21
3.402	Nonpriority creditor's name and mailing address Time Warner-8301- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>12/3/2018 0:00</u> Last 4 digits of account number <u>4001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$863.26
3.403	Nonpriority creditor's name and mailing address Time Warner-8301- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>1/3/2019 0:00</u> Last 4 digits of account number <u>4001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$876.20
3.404	Nonpriority creditor's name and mailing address Time Warner-8301- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>2/3/2019 0:00</u> Last 4 digits of account number <u>4001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$876.09

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3.405	Nonpriority creditor's name and mailing address Time Warner-8301- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>3/2/2019 0:00</u> Last 4 digits of account number <u>4001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$889.23
3.406	Nonpriority creditor's name and mailing address Time Warner-9001- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>3/2/2019 0:00</u> Last 4 digits of account number <u>0219</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$873.84
3.407	Nonpriority creditor's name and mailing address Time Warner-9001- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>4/9/2019 0:00</u> Last 4 digits of account number <u>0219</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$889.03
3.408	Nonpriority creditor's name and mailing address Time Warner-9001- PA P.O. Box 901 Carol Stream, IL 60132-0901 Date(s) debt was incurred <u>5/3/2019 0:00</u> Last 4 digits of account number <u>0219</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$902.37
3.409	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>3/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.410	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>4/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.411	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>5/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.90

Debtor **Affiniti PA, LLC**
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3.412	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>6/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.413	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.414	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>8/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.415	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>9/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.416	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>10/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.417	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.418	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50

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3.419	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.420	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.421	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.50
3.422	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,013.50
3.423	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,013.50
3.424	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,013.50
3.425	Nonpriority creditor's name and mailing address Triangle Communications, Inc. - PA 99 15th Street New Cumberland, PA 17070 Date(s) debt was incurred <u>7/1/2019 0:00</u> Last 4 digits of account number <u>I001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,013.50

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3.426	Nonpriority creditor's name and mailing address USIC Locating Service LLC - PA P.O. Box 713359 Cincinnati, OH 45271 Date(s) debt was incurred <u>5/31/2019 0:00</u> Last 4 digits of account number <u>LMI</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,065.48
3.427	Nonpriority creditor's name and mailing address USIC Locating Service LLC - PA P.O. Box 713359 Cincinnati, OH 45271 Date(s) debt was incurred <u>6/30/2019 0:00</u> Last 4 digits of account number <u>LMI</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,005.19
3.428	Nonpriority creditor's name and mailing address Verizon (Special Projects)-3198 PA P.O. Box 4861 Trenton, NJ 08650-4861 Date(s) debt was incurred <u>5/21/2019 0:00</u> Last 4 digits of account number <u>3198</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$93.32
3.429	Nonpriority creditor's name and mailing address Verizon - 4155 - Pa P.O. Box 4861 Trenton, NJ 08650-4861 Date(s) debt was incurred <u>2/13/2019 0:00</u> Last 4 digits of account number <u>4155</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,858.08
3.430	Nonpriority creditor's name and mailing address VERIZON-2924 PA P.O. Box 15124 Albany, NY 12212-5124 Date(s) debt was incurred <u>3/27/2019 0:00</u> Last 4 digits of account number <u>2924</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$106.63
3.431	Nonpriority creditor's name and mailing address VERIZON-2924 PA P.O. Box 15124 Albany, NY 12212-5124 Date(s) debt was incurred <u>4/27/2019 0:00</u> Last 4 digits of account number <u>2924</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$143.96
3.432	Nonpriority creditor's name and mailing address VERIZON-2924 PA P.O. Box 15124 Albany, NY 12212-5124 Date(s) debt was incurred <u>5/27/2019 0:00</u> Last 4 digits of account number <u>2924</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21.18

3.433	Nonpriority creditor's name and mailing address WestPA.net 216 Pennsylvania Avenue West Warren, PA 16365 Date(s) debt was incurred <u>6/30/2019 0:00</u> Last 4 digits of account number <u>Affiniti</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$475.00
3.434	Nonpriority creditor's name and mailing address WestPenn Power 2693 P.O. Box 3687 Akron, OH 44309-3687 Date(s) debt was incurred <u>6/10/2019 0:00</u> Last 4 digits of account number <u>2693</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60.55
3.435	Nonpriority creditor's name and mailing address WestPenn Power 2693 P.O. Box 3687 Akron, OH 44309-3687 Date(s) debt was incurred <u>7/10/2019 0:00</u> Last 4 digits of account number <u>2693</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67.61
3.436	Nonpriority creditor's name and mailing address WestPenn Power 6085 P.O. Box 3687 Akron, OH 44309-3687 Date(s) debt was incurred <u>6/7/2019 0:00</u> Last 4 digits of account number <u>6085</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$58.53
3.437	Nonpriority creditor's name and mailing address WestPenn Power 6085 P.O. Box 3687 Akron, OH 44309-3687 Date(s) debt was incurred <u>7/8/2019 0:00</u> Last 4 digits of account number <u>6085</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61.33
3.438	Nonpriority creditor's name and mailing address Windstream Communications - PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>5/7/2019 0:00</u> Last 4 digits of account number <u>MZZZ</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,177.91
3.439	Nonpriority creditor's name and mailing address Windstream Communications - PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>6/11/2019 0:00</u> Last 4 digits of account number <u>MZZZ</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,184.45

3.440	Nonpriority creditor's name and mailing address Windstream KDL, INC - CSEZZZ - PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>3/18/2019 0:00</u> Last 4 digits of account number <u>EZZZ</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,530.25 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.441	Nonpriority creditor's name and mailing address Windstream KDL, INC - CSEZZZ - PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>4/10/2019 0:00</u> Last 4 digits of account number <u>EZZZ</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,858.74 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.442	Nonpriority creditor's name and mailing address Windstream KDL, INC - CSEZZZ - PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>4/13/2019 0:00</u> Last 4 digits of account number <u>EZZZ</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,608.54 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.443	Nonpriority creditor's name and mailing address Windstream KDL, INC - CSEZZZ - PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>5/13/2019 0:00</u> Last 4 digits of account number <u>EZZZ</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,455.51 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.444	Nonpriority creditor's name and mailing address Windstream KDL, INC - CSEZZZ - PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>5/13/2019 0:00</u> Last 4 digits of account number <u>EZZZ</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,755.95 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.445	Nonpriority creditor's name and mailing address Windstream KDL, INC - CSEZZZ - PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>6/11/2019 0:00</u> Last 4 digits of account number <u>EZZZ</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,757.26 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.446	Nonpriority creditor's name and mailing address Windstream KDL, INC - CSEZZZ - PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>6/18/2019 0:00</u> Last 4 digits of account number <u>EZZZ</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,266.47
3.447	Nonpriority creditor's name and mailing address WINDSTREAM-CSPXJA-PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>5/13/2019 0:00</u> Last 4 digits of account number <u>PXJA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,673.72
3.448	Nonpriority creditor's name and mailing address WINDSTREAM-CSPXJA-PA P.O. Box 60549 Attn:CABS Acct Management c/o Bank of America, N.A. St. Louis, MO 63160-0549 Date(s) debt was incurred <u>6/11/2019 0:00</u> Last 4 digits of account number <u>PXJA</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,646.22
3.449	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>5/1/2018 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,233.81
3.450	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>6/1/2018 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,233.81
3.451	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>7/1/2018 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,233.81
3.452	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>8/1/2018 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,233.81

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3.453	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>9/1/2018 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,233.81</u>
3.454	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>9/30/2018 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,233.81</u>
3.455	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>11/1/2018 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,233.81</u>
3.456	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>12/1/2018 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,233.81</u>
3.457	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>1/1/2019 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,233.81</u>
3.458	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>2/1/2019 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,233.81</u>
3.459	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>3/1/2019 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,233.81</u>

3.460	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>4/1/2019 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,233.81
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3.461	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>5/1/2019 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,233.81
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3.462	Nonpriority creditor's name and mailing address WITF Inc - PA 4801 Lindle Road Harrisburg, PA 17111-2444 Date(s) debt was incurred <u>6/1/2019 0:00</u> Last 4 digits of account number <u>0031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,233.81
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	On which line in Part 1 or Part 2 is the related creditor (if any) listed? <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Last 4 digits of account number, if any <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
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Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
 Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 8,559.82
5b. +	\$ 981,448.50
5c.	\$ 990,008.32

Fill in this information to identify the case:

Debtor name **Affiniti PA, LLC**

United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Lease for tower**

State the term remaining **Auto renew 10x 5yr**

List the contract number of any government contract _____

**Carolyn Snyder
Steven Snyder
8157 Joshua Way
Three Springs, PA 17264**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Lease for tower**

State the term remaining **16 remaining 1 year terms. 120-day anytime termination**

List the contract number of any government contract _____

**Mount Collins Cemetery Association
Tionesta
Forest County
Tionesta, PA 16353**

Fill in this information to identify the case:Debtor name **Affiniti PA, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor*

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:Debtor name **Affiniti PA, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****04/19**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From **7/01/2019** to **Filing Date****Sources of revenue**

Check all that apply

☒ Operating a business☐ Other _____**Gross revenue**
(before deductions and exclusions)**Unknown****For prior year:**From **7/01/2018** to **06/30/2019**☒ Operating a business☐ Other _____**\$6,205,151.00****For year before that:**From **7/01/2017** to **06/30/2018**☒ Operating a business☐ Other _____**\$6,432,221.00****2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**From **1/01/2019** to **Filing Date****IP Block Sales****\$141,813.60****For prior year:**From **1/01/2018** to **12/31/2018****Tower Sales****Unknown****Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**
*Check all that apply***4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.**Insider's name and address**
Relationship to debtor**Dates****Total amount of value****Reasons for payment or transfer****5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None**Creditor's name and address****Describe of the Property****Date****Value of property****6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None**Creditor's name and address****Description of the action creditor took****Date action was taken****Amount****Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.**Case title**
Case number**Nature of case****Court or agency's name and address****Status of case**7.1. **Affiniti PA, LLC**
A-2013-2375466**Application for**
Approval of
Abandonment or
Discontinuance of
all CAP Services.
Order entered
10/24/2019**Pennsylvania Public Utility**
Commission
400 North Street
Suite 3
Harrisburg, PA 17120☐ Pending
☐ On appeal
☒ Concluded**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address

Description of the gifts or contributions

Dates given

Value

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred

Amount of payments received for the loss

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

Dates of loss

Value of property lost

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.Who was paid or who received the transfer?
Address

If not money, describe any property transferred

Dates

Total amount or value

11.1. **Dilworth Paxson LLP**
1500 Market Street, Suite
3500E
Philadelphia, PA 19102

Attorney Fees**\$5,000.00**Email or website address
aaaronson@dilworthlaw.com

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device

Describe any property transferred

Dates transfers were made

Total amount or value

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1	Asbury Group Integrated Technology	IP Blocks - 11/062019 agreement		\$3,000.00
	Relationship to debtor			
13.2	Brander Group	IP Blocks - 1032019 agreement		\$30,720.00
	Relationship to debtor			
13.3	Brander Group	IP Blocks - SLS 396		\$70,041.60
	Relationship to debtor			
13.4	Drive_CONXX IP Block Sale	IP Blocks		\$4,352.00
	Relationship to debtor			
13.5	In the Stix Broadband	IP Blocks - INV000000000401		\$18,750.00
	Relationship to debtor			
13.6	Masters Communications	IP Blocks - INV000000000400		\$6,250.00
	Relationship to debtor			
13.7	Weidenhammer	IP Blocks		\$8,700.00
	Relationship to debtor			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

	Address	Dates of occupancy From-To
14.1.	9208 Waterford Centre Blvd., Suite 150 Austin, TX 78758	
14.2.	38 South 8th Street-Rear Lebanon, PA 17042	

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☐ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☐ None

Depository institution name and address

Names of anyone with access to it
Address

Description of the contents

Do you still have it?

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

Facility name and address

Names of anyone with access to it

Description of the contents

Do you still have it?

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
------------------	----------------------------

Name and address	Date of service From-To
26a.1. Virginia A. Bryant P.O. Box 81594 Austin, TX 78758	July 2017 to July 2019

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26b.1. PMB Helin Donovan 12301 Research Blvd, Bldg. 5 Austin, TX 78759	

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Safe Site Storage 19505 Johnny Morris Road Austin, TX 78724	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. Bridge Bank 55 Almaden Blvd Suite 100 San Jose, CA 95113
26d.2. Global Leverage Capital 451 Jackson St 2nd Floor San Francisco, CA 94111
26d.3. Tatonka Capital 10375 Park Meadows Drive #230 Lone Tree, CO 80124

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No
☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Virginia Bryant	P.O. Box 81594 Austin, TX 78758	Vice President of Finance	
Name	Address	Position and nature of any interest	% of interest, if any
Lee Buckner	451 Jackson Street San Francisco, CA 94111	Chairman of the Board and Director	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No
☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Andy Perlmutter	3129 West Addison Drive Alpharetta, GA 30022	President and Chief Executive Officer	January 2015-January 2018
Name	Address	Position and nature of any interest	Period during which position or interest was held
Ira Levy	13020 Twelve Trees Court Clarksville, MD 21029	Chief Operations Officer	February 2015-December 2018
Name	Address	Position and nature of any interest	Period during which position or interest was held
Brian Field	2280 San Jose Way Canyon Lake, TX 78133	Sr. VP of Sales	October 2017-November 2018
Name	Address	Position and nature of any interest	Period during which position or interest was held
Monica Albano	2727 South Ocean Beach Blvd. #406 Highland Beach, FL 33487	Sr. VP of Human Resources	October 2014-July 2019

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
Affiniti Holdings, Inc.	EIN: 5923

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 12/12/2019

Virginia Bryant
Signature of individual signing on behalf of the debtor

Virginia Bryant
Printed name

Position or relationship to debtor Vice President of Finance

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

United States Bankruptcy Court
Middle District of Pennsylvania

In re **Affiniti PA, LLC**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>5,000.00</u>
Prior to the filing of this statement I have received	\$	<u>5,000.00</u>
Balance Due	\$	<u>0.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

December 13, 2019

Date

/s/ Martin J. Weis

Martin J. Weis

Signature of Attorney

Dilworth Paxson LLP

1500 Market Street, Suite 3500E

Philadelphia, PA 19102

215-575-7000 Fax: 215-575-7200

mweis@dilworthlaw.com

Name of law firm

**United States Bankruptcy Court
Middle District of Pennsylvania**

In re **Affiniti PA, LLC**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the Vice President of Finance of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: 12/12/2019

Virginia Bryant
Virginia Bryant/Vice President of Finance
Signer/Title

American Legion of Foxburg - PA
P.O. Box 348
Route 58
Foxburg, PA 16036-0348

American Tower, LP -93172 -PA
29637 Network Place
Chicago, IL 60673-1296

Armstron-1293-PA
437 N. Main St.
Butler, PA 16001-4358

Armstrong-1283-PA
437 N. Main St.
Butler, PA 16001-4358

Armstrong-1286-PA
437 N. Main St.
Butler, PA 16001-4358

Armstrong-1288-PA
437 N. Main St.
Butler, PA 16001-4358

Armstrong-1289-PA
437 N. Main St.
Butler, PA 16001-4358

Armstrong-1290-PA
437 N. Main St.
Butler, PA 16001-4358

Armstrong-1298-PA
437 N. Main St.
Butler, PA 16001-4358

Atlantic Broadband -5870
P.O. Box 371801
Pittsburgh, PA 15250-7801

Atlantic Broadband 7698-pa
P.O. Box 371801
Pittsburgh, PA 15250-7801

Atlantic Broadband 9728
P.O. Box 371801
Pittsburgh, PA 15250-7801

Atlantic Broadband-1016-PA
P.O. Box 371801
Pittsburgh, PA 15250-7801

Atlantic Broadband-3074
P.O. Box 371801
Pittsburgh, PA 15250-7801

Atlantic Broadband-3349-PA
P.O. Box 371801
Pittsburgh, PA 15250-7801

Atlantic Broadband-4047-PA
P.O. Box 371801
Pittsburgh, PA 15250-7801

Atlantic Broadband-5692-PA
P.O. Box 371801
Pittsburgh, PA 15250-7801

Atlantic Broadband-8481
P.O. Box 371801
Pittsburgh, PA 15250-7801

Carolyn Snyder
Steven Snyder
8157 Joshua Way
Three Springs, PA 17264

Centre Communication Inc
P.O. Box 119
Bellefonte, PA 16823

CENTRE TOWER SERVICES, INC
P.O. Box 119
Bellefonte, PA 16823

Century Link 0286-PA
P.O. Box 1319
Charlotte, NC 28201-1319

Century Link 2419 PA
P.O. Box 1319
Charlotte, NC 28201-1319

Century Link 2654 PA
P.O. Box 1319
Charlotte, NC 28201-1319

Century Link 7395 PA
P.O. Box 1319
Charlotte, NC 28201-1319

Century Link-1915-PA
P.O. Box 1319
Charlotte, NC 28201-1319

Century Link-9375-PA
P.O. Box 1319
Charlotte, NC 28201-1319

Clearfield County 911 - PA
911 Leonard St.
Clearfield, PA 16801

Cogent Communications
P.O. Box 791087
Baltimore, MD 21279-1087

Comcast (4326) - PA
P.O. Box 37601
Philadelphia, PA 19101-0601

Comcast (9840) - PA
P.O. Box 37601
Philadelphia, PA 19101-0601

COMCAST 1840-PA
P.O. Box 3001
Southeastern, PA 19398-3001

Comcast-0163-PA
P.O. Box 37601
Philadelphia, PA 19101-0601

COMCAST8952-PA
P.O. Box 37601
Philadelphia, PA 19101-0601

Commonwealth of Pennsylvania
PO Box 280427
Harrisburg, PA 17128

COUNTY OF CLARION-tower
330 Main Street
Room 217
Clarion, PA 16214

Crown Castle Fiber
P.O. Box 21772
New York, NY 10087-1772

Crown Communications -116577 - PA
2000 Corporate Drive
Canonsburg, PA 15317

Deborah B. Langehennig
Chapter 13 Trustee 17-11612
6201 Guadalupe St.
Austin, TX 78752

Diamond Communication - PA
820 Morris Turnpike
Suite 104
Short Hills, NJ 07078

Diocese of Altoona-Johnstown
927 South Logan Blvd.
Hollidaysburg, PA 16648

DQE Communications
P.O. Box 535378
Pittsburgh, PA 15253-5378

EMF Broadcasting (dba KLOVE AiR1)
P.O. Box 1685
Rocklin, CA 95677

Ephrata Area Repeater Society - PA
P.O. Box 674
Ephrata, PA 17522

Equinix Services, Inc. - PA
4252 Solutions Center
Chicago, IL 60677-4002

Global Leverage Capital Credit
Opportunity Fund I (GLC)
451 Jackson Street
2nd Floor
San Francisco, CA 94111

GTP Towers Issuer LLC- Clarion - PA
Dept 3328
Carol Stream, IL 60132-3328

GTP-Warfordsburg-PA
Dept 3328
Carol Stream, IL 60132-3328

GTT COMMUNICATIONS INC
7900 Tysons One Place
Suite 1450
McClean, VA 22102

GVNW/PA UNIVERSAL SERVICE FUND
1695 State ST.
Fulton Bank
East Petersburg, PA 17520

GVNW/PA Universal Service Fund
GVNW Consulting, Inc.
PA USF Administrator
3220 Pleasant Run, Suite A
Springfield, IL 62711

Handsome Brothers Inc - PA
2513 6th Avenue
Altoona, PA 16602

Hilltop Tower Leasing Inc. - PA
400 Highland Ave.
Altoona, PA 16602

Indiana County - PA
801 Water Street
Indiana County Development Corp
Indiana, PA 15701-1705

Level 3 Communication 1-8Y2NS - PA
P.O. Box 910182
Denver, CO 80291-0182

Level 3 Communication 13GV1076 - PA
P.O. Box 910182
Denver, CO 80291-0182

Level 3- 039523-PA
P.O. Box 931843
Atlanta, GA 31193-1843

Mount Collins Cemetery Association
Tionesta
Forest County
Tionesta, PA 16353

Mount Collins Cemetery Association - PA
U.S. 62
Tionesta, PA 16353

Nittany Media, Inc. - PA
18 N. Juniata ST.
Lewistown, PA 17044

Northeast Tower Rental LLC - PA
4271 Mucy-Exchange Road
Turbotville, PA 17772

PA Department of Revenue
PO Box 280427
Harrisburg, PA 17128-0427

PA Game Commission
P.O. Box 2833
Harrisburg, PA 17105

Pennsylvania One Call
P.O. Box 640407
Pittsburgh, PA 15264-0407

Pennsylvania Public Utility Comm
400 North Street
Suite 3
Harrisburg, PA 17120

PenTeleData - PA
P.O. Box 401
ATTN: Payment Processing Center
Palmerton, PA

Presidio Networked Solutions
P.O. Box 822169
Philadelphia, PA 19182-2169

REA Energy Coop Inc-7031-PA
P.O. Box 70
Indiana, PA 15701-0070

SBA Properties, LLC-06297- PA
P.O. Box 101667
Atlanta, GA 30392-1667

SBA Towers II-Mult-PA
P.O. Box 933730
Atlanta, GA 31193-3730

SBA Towers, LLC-02561- PA
P.O. Box 945752
Atlanta, GA 30394-5752

Shade Township
Attn: Cynthia J. Walters
PO Box 169
Cairnbrook, PA 15924

Somerset Rural Electric - PA
223 Industrial Park Rd.
Somerset, PA 15501-3406

Subcarrier Communications, Inc. - PA
139 White Oak Lane
Old Bridge, NJ 08857

T-WARNR9201-PA
P.O. Box 901
Carol Stream, IL 60132-0901

Tessco - PA
P.O. Box 102885
Atlanta, GA 30368-2885

Thomas McClintock - PA
104 Samuels Road
Somerset, PA 15501

Time Warner - Endless Mountain (5501) -
P.O. Box 223085
Pittsburgh, PA 15251-2085

Time Warner - Erie (8801) - PA
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner Cable (60S Greenville)-9802
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner Cable - (3591 Sharon Rd) - (
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner Cable - (425 S Good Hope) -
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner Cable - 2901- PA
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner Cable 8801-PA
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner Cable-1701-PA
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner Cable-6801-PA
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner-7101-PA
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner-8301- PA
P.O. Box 901
Carol Stream, IL 60132-0901

Time Warner-9001- PA
P.O. Box 901
Carol Stream, IL 60132-0901

Triangle Communications, Inc. - PA
99 15th Street
New Cumberland, PA 17070

USIC Locating Service LLC - PA
P.O. Box 713359
Cincinnati, OH 45271

Verizon (Special Projects)-3198 PA
P.O. Box 4861
Trenton, NJ 08650-4861

Verizon - 4155 - Pa
P.O. Box 4861
Trenton, NJ 08650-4861

VERIZON-2924 PA
P.O. Box 15124
Albany, NY 12212-5124

WestPA.net
216 Pennsylvania Avenue West
Warren, PA 16365

WestPenn Power 2693
P.O. Box 3687
Akron, OH 44309-3687

WestPenn Power 6085
P.O. Box 3687
Akron, OH 44309-3687

Windstream Communications - PA
P.O. Box 60549
Attn:CABS Acct Management
c/o Bank of America, N.A.
St. Louis, MO 63160-0549

Windstream KDL, INC - CSEZZZ - PA
P.O. Box 60549
Attn:CABS Acct Management
c/o Bank of America, N.A.
St. Louis, MO 63160-0549

WINDSTREAM-CSPXJA-PA
P.O. Box 60549
Attn:CABS Acct Management
c/o Bank of America, N.A.
St. Louis, MO 63160-0549

WITF Inc - PA
4801 Lindle Road
Harrisburg, PA 17111-2444

**United States Bankruptcy Court
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CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Affiniti PA, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

December 13, 2019

Date

/s/ Martin J. Weis

Martin J. Weis

Signature of Attorney or Litigant
Counsel for **Affiniti PA, LLC**

Dilworth Paxson LLP

1500 Market Street, Suite 3500E

Philadelphia, PA 19102

215-575-7000 Fax: 215-575-7200

mweis@dilworthlaw.com